

Government of the Northwest Territories Seniors' Strategic Framework

Cadre stratégique du gouvernement des Territoires du Nord-Ouest pour les personnes âgées

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Le présent document contient la traduction
française du résumé et du message du ministre.

Mandate commitment of the 19th Legislative Assembly
Engagement du mandat de la 19^e Assemblée législative

Government of Northwest Territories Gouvernement des Territoires du Nord-Ouest

English

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Message from the Minister

As Minister Responsible for Seniors, I am pleased to present the Government of the Northwest Territories' Seniors' Strategic Framework. NWT seniors are deeply respected for their knowledge, wisdom, and contributions to our communities, and we are committed to working with our partners to enable seniors to age in place with dignity. This Strategic Framework provides a foundation for improving programs, services, and initiatives for seniors to better meet their needs and enable them to age in place with dignity.

Meeting the diverse needs of seniors to enable them to age in place with dignity is a Mandate priority for the 19th Legislative Assembly. As seniors age, they often require more supports to remain living in their homes and their communities. Programs and services for seniors must recognize and respect their unique place in our communities and reflect their interests and needs. We must also recognize the diversity of seniors and their abilities, and ensure our programs and services are responsive to their reality. Ensuring seniors can age in place facilitates seniors maintaining their independence, their relationships, their cultural practices, and their contributions within community.

Many people and organizations contributed to this Strategic Framework. This reflects their commitment and respect for seniors and their valued place in our communities and territory. Their participation strengthened our understanding of the needs of seniors, existing gaps in programs and services, and provided insights as to how to enable seniors to age in place with dignity. I would like to thank everyone for their input, in particular, the seniors who provided valuable insights and suggestions.

Hon. Julie Green
Minister Responsible for Seniors



Message de la ministre

À titre de ministre responsable des personnes âgées, je suis heureuse de vous présenter le Cadre stratégique pour les personnes âgées du gouvernement des Territoires du Nord-Ouest. Les personnes âgées des Territoires du Nord Ouest possèdent des connaissances et une sagesse qui inspirent le respect et contribuent de façon indéniable à la vie communautaire. Nous nous engageons à travailler avec nos partenaires pour leur permettre de vieillir chez elles dans la dignité. Le présent cadre stratégique fournit les bases nécessaires pour améliorer les initiatives, les programmes et les services qui sont offerts aux personnes âgées et ainsi mieux répondre à leurs besoins et leur permettre de vieillir dignement chez elles.

Rappelons que dans son mandat, la 19^e Assemblée législative s'est fixé comme priorité de répondre aux divers besoins des personnes âgées pour leur permettre de vieillir chez elles dans la dignité. En effet, si nous souhaitons que les personnes âgées habitent chez elles plus longtemps, nous devons leur offrir du soutien. D'où la nécessité d'offrir des programmes et des services qui reconnaissent et respectent leur rôle unique dans nos collectivités et qui tiennent compte de leurs droits et de leurs besoins. Ajoutons que nous devons reconnaître la diversité et les compétences des personnes âgées et nous assurer que les programmes et services sont adaptés à leur réalité. En permettant aux personnes âgées de vieillir chez elles, nous contribuons au maintien de leur autonomie, de leurs relations, de leurs pratiques culturelles, et de leur participation à leur collectivité.

Plusieurs personnes et organisations ont contribué au cadre stratégique, témoignant ainsi de leur engagement et de leur respect pour les personnes âgées, et de leur rôle précieux dans nos collectivités et notre territoire. Leur collaboration nous a aidés à mieux comprendre les besoins des personnes âgées, à cerner les lacunes existantes dans les programmes et les services, et nous a orientés sur les façons de permettre aux personnes âgées de vieillir chez elles dans la dignité. Je souhaite remercier toutes les personnes qui ont formulé des commentaires, tout particulièrement les personnes âgées qui ont pris le temps de nous faire part de leur point de vue et de leurs suggestions. Leurs observations nous ont été grandement utiles.

Julie Green

Ministre responsable des personnes âgées



Executive Summary

The Government of the Northwest Territories (GNWT) values seniors and is committed to enabling them to age in place with dignity. Aging in place refers to “having access to services and the health and social supports you need to live safely and independently in your home or your community for as long as you wish or are able” (Rosenberg et. al., 2022). To continue to work towards the goal of enabling seniors to age in place with dignity, the GNWT has undertaken the development of a seniors’ strategic framework. This Strategic Framework was informed by engagement activities that were conducted in 2022 along with a review of relevant literature and statistical data.

Across the globe and Canada, age-friendly communities are seen as important to helping seniors to maintain good health, stay involved in their communities, and to live safely. The eight domains of age-friendly communities, first introduced by the World Health Organization in 2007 and since adopted around the world, were incorporated into four intersecting pillars which form the foundation of this framework and provided a structure for the engagement activities, literature, and data review.

Age-friendly communities contribute to aging in place with dignity.

The four pillars are Built Environment; Healthy Aging; Safety; and Information and Communication.

Seniors, their caregivers and families, non-government organizations serving seniors, and community and Indigenous governments provided valuable insights into the current situation and needs of seniors to enable them to age with dignity in the territory (Appendix A). Most seniors indicated that they wanted to age in place and that they would require various core community supports and housing options to do so.

The diversity of seniors within communities and across the territory was also consistently expressed. This diversity extends beyond their identity to include their abilities, means, needs, and preferences. The diversity was also noted in the built environment, programs, and services in their communities – all of which impacts their ability to age in place with dignity. Additionally, seniors communicated that they want to be included and treated with respect, dignity, and valued for their knowledge, skills, and experience.

Seniors indicated that they wanted to age in place with dignity and that they would require various core community supports and housing options to do so.

Seniors shared many valuable insights about specific issues that impact them. They expressed concerns about living on a fixed income, especially given the cost of living in the north and rising inflation. Seniors identified concerns about every aspect of their built environment, including the housing continuum, public and private community infrastructure, and transportation services.

Seniors are concerned about every aspect of their lives and their ability to age in place with dignity in the NWT.

Seniors identified concerns about the availability of and access to health care, mental health services, and core community supports. Seniors also spoke to the negative impact of Covid-19 on their recreational and social lives, and the desire for regular, age-friendly, and affordable recreational and social activities.

They also expressed concerns about the social isolation and loneliness of other seniors in their communities, and the associated impact on their mental health and wellness. Personal and property safety were also top of mind for seniors across the territory.

Seniors also indicated that it was challenging to access information and services when they were needed. Concerns were also raised about the fairness of program eligibility criteria and navigating the current system.

The concerns and challenges raised by seniors were echoed by other engagement stakeholders and confirmed by the statistical data and research.

- NWT seniors' data shows that seniors (65 years and older) are experiencing low levels of income which impacts on their ability to afford the basic necessities of life;
- NWT seniors' housing data demonstrated a variety of challenges with adequate, affordable, suitable, available, and accessible housing in many communities;
- Seniors are experiencing chronic health conditions, and high rates of hospitalization related to chronic health conditions and substance use;
- A review of GNWT programs and services for seniors identified that there have been minimal changes in the programs and services delivered since the Report on Seniors Access to Government of Northwest Territories Programs and Services was published in 2019; and
- The review of literature confirmed that there are many factors that have a cumulative impact the supports seniors need to age in place such as: overall health, social connections, income, housing, community infrastructure and services, safety, and support from family, friends, and community.

Everyone has a role to play to advance aging in place with dignity in the NWT.

What we heard from engagement stakeholders and learned from a review of the data and research contributed to an enhanced understanding of the current reality of seniors in the NWT. These learnings also highlighted the breadth and depth of programs, services, and initiatives required for enabling aging in place with dignity in the NWT. Accordingly, it is clear that enabling aging in place with dignity requires a whole-of-government approach as well as the participation of individuals, community organizations, non-profits, and the private sector.

Based on what has been heard and what has been learned, the NWT Seniors' Strategic Framework identifies twenty (20) areas of focus that are necessary to address if we want to enhance the ability of NWT seniors to age in place with dignity (Appendix C). Although most stakeholders were not familiar with the concept of age-friendly communities, the challenges that were identified and their suggestions for improvements touched on all eight domains of age-friendly communities.



Pillar One

The Built Environment

The Built Environment refers to everything that is human made that supports one's daily life and activities.

The areas of focus include the accessibility, suitability, and in some instances, affordability of the built environment to enhance seniors' safety and their ability to participate in activities of daily life, as well as recreational, cultural, and social activities.

Findings	Focus Areas
<ul style="list-style-type: none">• There are issues and challenges related to all aspects of the built environment – the housing continuum, community infrastructure, transportation, and more which impacts the ability of seniors to age in place with dignity.• These issues and challenges encompass affordability, adequacy, suitability, availability, safety, accessibility, and whether or not the built environment is age-friendly.• These issues exist across all communities in the NWT but are more evident and challenging in some communities than others.• The diversity of the built environment, as it relates to seniors aging in place with dignity, is vast in the NWT.	<ul style="list-style-type: none">• Adequate, affordable, suitable, accessible, and safe options along the housing continuum complemented by core community supports.• Accessible buildings, roads and sidewalks, open spaces, and trails within communities.• Affordable, accessible, and inclusive community transportation services.• Accessible and age-friendly community spaces for recreational, cultural, and social activities for seniors.• Alignment with principles of age-friendly communities.



Pillar Two

Healthy Aging

Healthy aging refers to the physical, mental, and social health and well-being of a senior which is multi-faceted and impacted by the social determinants of health.

The areas of focus include financial supports, health care and home care services, practical assistance supports for seniors, as well as accessible, affordable, and age-appropriate opportunities for them to be physically, mentally, and socially active, which contributes to healthy aging.

Findings	Focus Areas
<ul style="list-style-type: none">Seniors, living on low and moderate incomes, are experiencing cost of living challenges that are impacting their ability to meet their basic needs and age in place with dignity.There are insufficient opportunities for physical, mental, and social activities for seniors across the territory.Seniors' access to health care, home care, and mental health services is not consistent within and between communities.There is an absence of practical assistance support for seniors.There are limited senior specific community programs and services in the NWT.	<ul style="list-style-type: none">A range of financial supports to address the cost of living and financial barriers that undermine healthy aging of seniors.Affordable, accessible, age-friendly, and regular opportunities for seniors to be physically, mentally, and socially active.Health care, home care, and mental health services that are available, accessible, and meet the diverse needs of seniors in the territory.Practical assistance supports (non-medical) for seniors so they may continue to live at home.Human resource capacity and financial resources for sustainable programs and services for seniors.



Pillar Three

Safety

Safety refers to the right of seniors to be safe – safe in their relationships, in their homes, and in their communities.

The areas of focus include activities to enhance the built environment, providing access to legal advice, safety information, and education as well as adopting a person-centred, integrated service delivery model for seniors at risk of, or experiencing abuse, neglect, and crime.

Findings	Focus Areas
<ul style="list-style-type: none">• There are concerns about the safety of seniors as it relates to accessibility, adequacy and maintenance of their homes and the built environment of their community.• There are concerns about the vulnerability of seniors to elder abuse, fraud, scams, property crime, and their general safety at home and in their communities.• There is insufficient technical and legal advice to support the autonomy of seniors.• There is an absence of information, education and supports to enable seniors to live safely.• There is not a clear pathway for seniors to access safety resources or elder abuse supports.	<ul style="list-style-type: none">• Community infrastructure that contributes to safe built environments.• The range of core community supports required for physically safe homes for seniors.• Access to technical and legal advice regarding power of attorney, estate planning, and wills.• Information, education, and supports to address elder abuse and personal, technology, financial, and property safety.• Integrated programs and services for seniors to mitigate social isolation and loneliness, and to enhance personal and community safety.


Pillar Four

Information and Communication

Information and Communication refers to what information is shared and how it is shared to support seniors accessing the programs and services they need, for making informed decisions, and participating in recreational, social, and cultural activities.

The areas of focus include relevant, timely and accessible information for seniors, embedding cultural safety, and system navigation services for seniors.

Findings	Focus Areas
<ul style="list-style-type: none">• Seniors are diverse in their preferences, abilities, and resources and as such, they want information to be communicated with them through a variety of mediums.• Seniors do not necessarily know where to find information, which may or may not be accurate and current, and find the system to be complex and challenging to navigate.• Not all seniors have technological tools, ability, and internet and cell phone packages. This results in barrier to accessing online information and virtual communications.• Seniors lack dedicated service providers, who are knowledgeable and will help them navigate the system.• There is a lack of senior focused interagency, interdepartmental, and intergovernmental collaboration and coordination, which is required to enable seniors to age in place with dignity.	<ul style="list-style-type: none">• A multi-medium and culturally safe approach to the delivery of information for, and communications with, seniors.• Timely, accurate, relevant, and accessible information for seniors.• Technology education and access to technology resources for seniors.• System navigator services for seniors.• Senior focused interagency, interdepartmental, and intergovernmental collaboration and coordination.



This Strategic Framework provides a foundation to guide future efforts of the GNWT to advance aging in place with dignity in the NWT.

It is aligned with the domains of age-friendly communities, which highlights the importance for coordination and collaboration across government and with communities.

It also recognizes that we must build on past, current, and ongoing programs, services, and initiatives to meet the diverse needs of seniors in the NWT.



Sommaire

Le gouvernement des Territoires du Nord-Ouest (GTNO) accorde une très grande importance aux personnes âgées et s'engage à leur permettre de vieillir chez elles dans la dignité; autrement dit, « d'avoir accès aux services généraux, sociaux et de santé nécessaires pour vivre de façon autonome et sécuritaire dans [leur] résidence ou [leur] collectivité tant et aussi longtemps qu'elles le souhaitent ou le peuvent » (Rosenberg et coll., 2022). Pour atteindre son objectif et continuer à permettre aux personnes âgées de vieillir chez elles dans la dignité, le GTNO a entrepris l'élaboration d'un cadre stratégique pour les personnes âgées. Ce cadre a été orienté par des activités d'échanges avec le public qui ont eu lieu en 2022, ainsi que par une revue de la littérature et des données statistiques pertinentes.

Partout dans le monde et au Canada, on souhaite aider les personnes âgées à maintenir une bonne santé, à rester actives et à vivre en toute sécurité en créant des collectivités qui leur sont plus adaptées. En 2007, l'Organisation mondiale de la santé a établi les huit domaines d'une collectivité-amie des aînés.

Les collectivités-amies des aînés permettent aux personnes âgées de vieillir chez elles dans la dignité.

Nous avons articulé ces huit domaines, adoptés partout dans le monde, en quatre grands piliers : l'environnement bâti, le vieillissement en santé, la sécurité, et l'information et la communication. Ces piliers sont à la base du présent cadre stratégique et ont servi de structure pour organiser les activités de sensibilisation, la littérature et l'examen des données.

Soulignons que les personnes âgées, les soignants et les familles, les organisations non gouvernementales servant les personnes âgées, les collectivités et les gouvernements autochtones ont fourni de précieux renseignements sur la situation et les besoins actuels des personnes âgées aux TNO pour leur permettre de vieillir dans la dignité (annexe A). La majorité des personnes âgées ont indiqué qu'elles souhaitaient vieillir chez elles, mais que pour y arriver, elles auraient besoin de divers soutiens communautaires de base et d'options de logements.

La diversité des personnes âgées dans les collectivités et partout aux TNO a également maintes fois été mentionnée pendant les échanges. Elle va au-delà de l'identité des personnes âgées et comprend leurs aptitudes, leurs moyens, leurs besoins et leurs préférences. Les personnes âgées ont fait remarquer que cette diversité fait également partie de l'environnement bâti et des programmes et des services offerts dans leur collectivité, et qu'elle nuit à leur capacité de vieillir chez elles dans la dignité. Par surcroît, elles ont exprimé la volonté de prendre part aux activités de la collectivité, d'être traité avec respect et dignité, et de faire valoir leurs connaissances, leurs compétences et leur expérience.

Les personnes âgées ont indiqué qu'elles souhaitaient vieillir chez elles dans la dignité, mais que pour y arriver, elles auraient besoin de divers soutiens communautaires de base et d'options de logements.

Les personnes âgées ont fait part de plusieurs observations utiles sur des questions précises qui les touchent. Elles ont exprimé des préoccupations sur le revenu fixe, compte tenu du coût de la vie dans le Nord et de la hausse de l'inflation. Elles ont également soulevé des inquiétudes sur tous les aspects de leur environnement bâti, parmi lesquelles le continuum du logement, les infrastructures communautaires publiques et privées et les services de transport.

Les personnes âgées ont soulevé des inquiétudes sur tous les aspects de leur vie dans leur collectivité et sur leur capacité à vieillir chez elles dans la dignité, aux TNO.

Les personnes âgées ont soulevé des questions sur l'accessibilité aux soins de santé, aux services de santé mentale et au soutien communautaire de base. Elles ont aussi évoqué les conséquences négatives de la COVID-19 sur leurs vies sociale et récréative, et la volonté de prendre régulièrement part à des activités sociales et récréatives abordables qui leur sont adaptées.

Elles ont également dit être préoccupées par l'isolement social et la solitude d'autres personnes âgées de leur collectivité, et par les répercussions de cet isolement et de cette solitude sur leur santé mentale et leur bien-être. Les personnes âgées des TNO ont de plus indiqué la sécurité personnelle et la sécurité des biens comme enjeux prioritaires.

Elles ont fait remarquer qu'il est difficile d'avoir accès à de l'information et à des services lorsqu'elles en ont besoin. Des inquiétudes ont été soulevées concernant l'objectivité des critères d'admissibilité aux programmes et l'orientation dans le système actuel.

On observe que les commentaires recueillis durant les échanges avec les intervenants ont été confirmés par des données statistiques et des recherches, et qu'ils font écho aux préoccupations et aux problèmes soulevés par les personnes âgées.

- Les données sur les personnes âgées des TNO (65 ans et plus) montrent qu'elles ont des revenus faibles, ce qui nuit à leur capacité de subvenir à leurs besoins essentiels.
- Les données sur le logement pour les personnes âgées des TNO révèlent toutes sortes de difficultés. Dans les collectivités, les logements ne sont souvent pas adaptés, abordables, logeables ou accessibles, ou ils sont tout simplement indisponibles.
- Les personnes âgées souffrent de problèmes de santé chroniques et affichent un taux d'hospitalisation élevé lié à ces problèmes et à la consommation de substances psychoactives.
- Un examen des programmes et des services du GTNO pour les personnes âgées montre que peu de changements ont été effectués aux programmes et aux services offerts depuis la publication du Rapport sur l'accès des personnes âgées aux programmes et services du gouvernement des Territoires du Nord-Ouest en 2019.
- La revue documentaire confirme que plusieurs facteurs s'accumulent et nuisent à la capacité des personnes âgées à vieillir chez elles, comme la santé générale, les liens sociaux, les revenus, le logement, les infrastructures et les services communautaires, la sécurité, et le soutien de la famille, des amis, et de la communauté.

Nous avons tous un rôle à jouer pour faire progresser les initiatives qui permettront aux personnes âgées des TNO de vieillir chez elles dans la dignité.

Les commentaires que nous avons recueillis des intervenants et les renseignements que nous avons obtenus de l'examen des données et des recherches ont amélioré notre compréhension de la réalité actuelle des personnes âgées aux TNO. Ces renseignements ont mis en évidence toute l'ampleur des enjeux soulevés et des changements que nous devons apporter aux programmes, aux services et aux initiatives pour permettre aux personnes âgées de vieillir chez elles dans la dignité. Voilà pourquoi il est clair qu'il faudra adopter une approche pangouvernementale et accroître la participation de la population, des organisations communautaires, des organismes sans but lucratif et du secteur privé pour que les personnes âgées ténoises puissent vieillir chez elles.

Grâce aux commentaires recueillis et aux informations obtenues, nous avons défini 20 enjeux prioritaires dans le cadre stratégique qui doivent être abordés si nous voulons permettre aux personnes âgées de vieillir chez elles dans la dignité (annexe C). Même si la majorité des intervenants ne connaissaient pas bien le concept de collectivités-amies des aînés, les obstacles relevés et les améliorations proposées se rapportaient quand même aux huit domaines des collectivités-amies des aînés.



1^{er} pilier

Environnement bâti

Par environnement bâti, on entend toute construction humaine qui soutient les activités de la vie quotidienne.

Les enjeux prioritaires sont, notamment, l'accessibilité, la logeabilité et, dans certains cas, l'abordabilité de l'environnement bâti. Ils visent à renforcer la sécurité des personnes âgées et leur capacité à prendre part aux activités de la vie quotidienne et aux activités récréatives, culturelles et sociales.

Constatations	Enjeux prioritaires
<ul style="list-style-type: none">• Nous avons cerné des problèmes liés à tous les aspects de l'environnement bâti – le continuum du logement, les infrastructures communautaires, les services de transport et plus encore – qui nuisent à la capacité des personnes âgées de vieillir chez elles dans la dignité.• Voici certains problèmes liés à l'environnement bâti : il n'est pas abordable, convenable, adapté, logeable, disponible, sûr ou accessible.• On trouve ces problèmes dans toutes les collectivités des TNO, mais ils sont particulièrement évidents et plus difficiles à surmonter dans certaines collectivités.• La diversité liée à l'environnement bâti est grande aux TNO, tout particulièrement en ce qui concerne le vieillissement des personnes âgées dans la dignité.	<ul style="list-style-type: none">• Assurer un continuum du logement en offrant un environnement bâti adapté, abordable, convenable, accessible et sécuritaire, et offrir des soutiens communautaires de base.• Construire des immeubles accessibles, des routes, des trottoirs, des espaces verts et des sentiers dans les collectivités.• Mettre en place des services de transport communautaires abordables, accessibles et inclusifs.• Mettre en place des espaces communautaires adaptés aux personnes âgées pour leurs activités culturelles, sociales et récréatives.• Harmoniser l'environnement bâti avec les principes des collectivités-amies des aînés.



2^e pilier

Vieillesse en santé

Le vieillissement en santé désigne la santé et le bien-être physiques, mentaux et sociaux d'une personne âgée, lesquels comportent de multiples facettes et sont influencés par les déterminants sociaux de la santé.

Voici certains enjeux prioritaires qui contribueraient au vieillissement en santé des personnes âgées : leur offrir du soutien financier, des soins de santé, des services à domicile et de l'aide concrète ainsi que des activités abordables, accessibles et adaptées à leur âge pour leur donner la possibilité d'être actives physiquement, mentalement et socialement.

Constatations	Enjeux prioritaires
<ul style="list-style-type: none">• Les personnes âgées qui ont un revenu faible ou moyen sont aux prises avec des problèmes liés au coût de la vie qui nuisent à leur capacité de répondre à leurs besoins de base pour vieillir chez elles dans la dignité.• Aux TNO, les personnes âgées n'ont pas suffisamment d'occasions de prendre part à des activités physiques, mentales et sociales.• L'accès des personnes âgées aux soins de santé, aux soins à domicile et aux services de santé mentale n'est pas uniforme au sein des collectivités et entre celles-ci.• Aucune aide concrète n'est offerte aux personnes âgées.• Les programmes et les services communautaires destinés aux personnes âgées sont limités aux TNO.	<ul style="list-style-type: none">• Offrir un éventail d'aides financières pour pallier le coût de la vie et surmonter les obstacles financiers qui nuisent au vieillissement en santé des personnes âgées.• Offrir régulièrement des activités abordables, accessibles et adaptées aux personnes âgées pour leur permettre de rester actives physiquement, mentalement et socialement.• Offrir des soins de santé, des soins à domicile et des services de santé mentale accessibles et adaptés aux besoins des personnes âgées des TNO.• Offrir de l'aide concrète (non médicale) aux personnes âgées pour leur permettre de vivre à la maison plus longtemps.• Augmenter la capacité en ressources humaines et les ressources financières des programmes et des services durables destinés aux personnes âgées.



3^e pilier

Sécurité

Le droit des personnes âgées à la sécurité dans leurs relations, leur résidence et leur collectivité.

Voici certains enjeux prioritaires liés à la sécurité : offrir des activités pour améliorer l'environnement bâti et fournir un accès à des conseils juridiques, à des informations sur la sécurité, à de l'éducation, et adopter un modèle de prestation de services intégrés axé sur la personne pour les personnes âgées qui risquent d'être victimes de mauvais traitements, de négligence ou de crimes, ou qui le sont actuellement.

Constatations	Enjeux prioritaires
<ul style="list-style-type: none">• L'accessibilité, la conformité et l'entretien des résidences et de l'environnement bâti des collectivités des personnes âgées suscitent des préoccupations.• La sécurité générale des personnes âgées et leur vulnérabilité aux mauvais traitements, à la fraude, aux escroqueries et aux infractions contre les biens à la maison et dans la collectivité suscitent des préoccupations.• Les conseils techniques et juridiques aux personnes âgées sont insuffisants pour leur permettre d'être pleinement autonomes.• Aucune information, aucune éducation et aucun soutien n'est offert aux personnes âgées pour les aider à vivre en sécurité.• Les ressources sur la sécurité ou le soutien pour les victimes de mauvais traitements ne sont pas facilement disponibles.	<ul style="list-style-type: none">• Mettre en place des infrastructures communautaires qui permettent de bâtir un environnement plus sécuritaire.• Mettre en place divers soutiens communautaires de base pour assurer la sécurité physique des personnes âgées dans leurs résidences.• Donner accès à des conseils techniques et juridiques sur les procurations, la planification successorale et les testaments.• Offrir de l'information, de l'éducation et du soutien pour lutter contre les mauvais traitements envers les personnes âgées et pour les renseigner sur la sécurité personnelle, informatique, financière et la sécurité des biens.• Offrir des programmes et des services intégrés pour les personnes âgées afin d'atténuer l'isolement social et la solitude, et de renforcer la sécurité personnelle et communautaire.

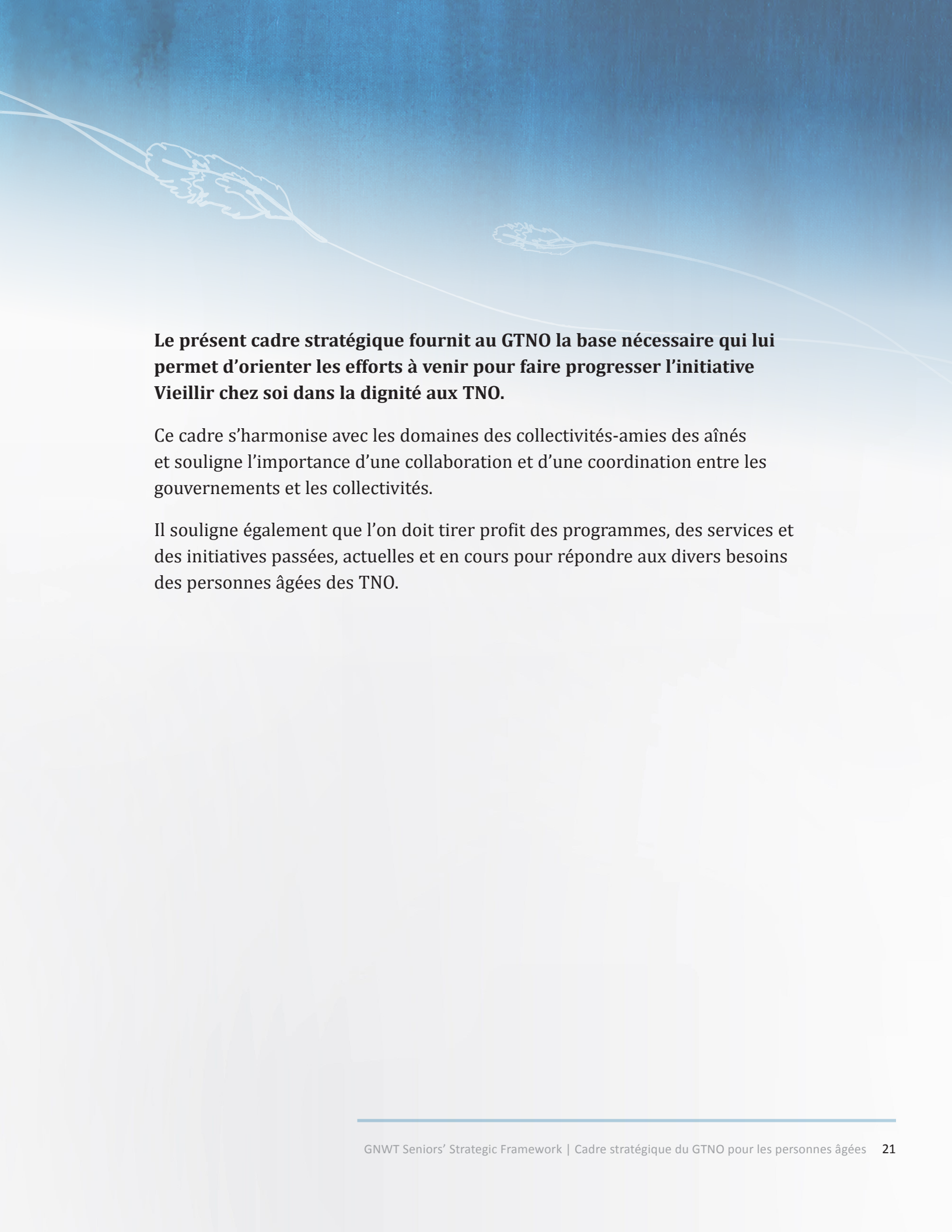
4^e pilier

Information et communication

Ce pilier renvoie à l'information communiquée et à la façon de la communiquer pour aider les personnes âgées à avoir accès aux programmes et aux services dont ils ont besoin, à prendre des décisions éclairées et à prendre part à des activités récréatives, sociales et culturelles.

Voici certains enjeux prioritaires liés à l'information et à la communication : communiquer aux personnes âgées des informations pertinentes, opportunes et accessibles qui respectent leur culture, et leur offrir des services de navigation du système.

Constatations	Enjeux prioritaires
<ul style="list-style-type: none">• Les préférences, les capacités et les ressources des personnes âgées sont diverses. C'est pourquoi elles souhaitent que l'on communique avec elles par divers moyens.• Les personnes âgées ne savent pas toujours où se rendre pour obtenir de l'information (qui n'est pas nécessairement exacte et à jour) et trouvent le système complexe et difficile à naviguer.• Les personnes âgées n'ont pas accès à tous les moyens technologiques, à Internet ou à un forfait cellulaire, et n'ont pas toutes la capacité de les utiliser, ce qui les empêche d'obtenir l'information dont elles ont besoin et de communiquer en ligne.• Les personnes âgées n'ont pas suffisamment accès à des fournisseurs de services informés et spécialisés pour les aider à se retrouver dans le système.• La collaboration et la coordination axées sur les personnes âgées entre les organismes, les ministères et les gouvernements sont insuffisantes, bien qu'elles soient nécessaires pour vieillir chez soi dans la dignité.	<ul style="list-style-type: none">• Mettre en place une approche multimédia qui respecte la culture pour transmettre des informations aux personnes âgées et communiquer avec elles.• Offrir de l'information opportune, exacte, pertinente et accessible aux personnes âgées.• Offrir de l'éducation sur les technologies et donner accès aux ressources en technologies aux personnes âgées.• Offrir les services d'intervenants pivots aux personnes âgées.• Renforcer la collaboration et la coordination entre les organismes, les ministères et les gouvernements pour les initiatives axées sur les personnes âgées.



Le présent cadre stratégique fournit au GTNO la base nécessaire qui lui permet d'orienter les efforts à venir pour faire progresser l'initiative Vieillir chez soi dans la dignité aux TNO.

Ce cadre s'harmonise avec les domaines des collectivités-amies des aînés et souligne l'importance d'une collaboration et d'une coordination entre les gouvernements et les collectivités.

Il souligne également que l'on doit tirer profit des programmes, des services et des initiatives passées, actuelles et en cours pour répondre aux divers besoins des personnes âgées des TNO.



Introduction

The population of the Northwest Territories and Canada is aging. Seniors make up the fastest-growing age group as people are living longer and there is a steadily declining national birth rate. These combined factors have resulted in seniors representing an ever-increasing proportion of the overall population. Somewhere between 2036 and 2041, seniors are expected to represent 25% of the total Canadian population (Rosenberg et. al, 2022).

An aging population has implications on many aspects of society, including the health care system, social services, the economy, the built environment, and beyond. Supporting aging in place requires a focus on every aspect of a senior's life and as such, individuals, non-profit organizations, the private sector, and all levels of government have a role to play.

Individuals, private, non-profit, and public sector entities all have a role to play to advance aging in place with dignity.

The NWT Seniors' Strategic Framework provides a way for the GNWT, and other organizations, to understand and strengthen our approaches to address the core issues that impact a senior's ability to age in place with dignity in an evidence-informed way. Informing this Strategic Framework are the valuable insights shared by seniors and other engagement stakeholders complemented by statistical data and research.

This Strategic Framework is organized around four (4) age-friendly pillars: the Built Environment, Healthy Aging, Safety, and Information and Communication.

Programs, services, and initiatives within each of these pillars intersect and impact the other pillars. Thus, improvements in one pillar should also improve outcomes in other pillars. This Strategic Framework is intended to honour and reflect the complexity, the diversity, and strengths of our seniors and our territory. It outlines areas of focus for collective action to advance aging in place with dignity in the NWT.

An Aging Population

Who is a Senior?

It should be noted that there is not a universally accepted definition of a senior. Through engagement activities, some people considered seniors as those persons 60 years and older, while others considered seniors to be those persons 65 years and older. These two age-based definitions of a senior are currently both in use as eligibility criteria for various GNWT programs and services.

There is not a universally accepted definition of a senior and there are different age-based eligibility criteria for various programs and services for seniors.

This document uses the term senior rather than elder to refer to persons of a particular age demographic. In the Northwest Territories, the term Elder is often used when referring to Indigenous seniors. However, the meaning of Elder is more nuanced, and for Indigenous people, “the term “Elder” does not refer to one’s age, but rather the level of cultural and traditional knowledge they hold” (Queen’s, 2022). In recognition of the Indigenous meaning of Elder, this document will use the term senior to reflect the focus on enabling older adults, whom we refer to as seniors, to age in place with dignity.

The Northwest Territories by the Numbers

The Seniors’ Population

The number and proportion of seniors in the NWT has steadily increased from 2000 to 2022. Between 2000 and 2022, the senior population (60 years and older) rose from 2,495 to 7,267 and the senior population (65 years and older) rose from 1,671 to 4,571.

- Seniors, defined as person 60 years and older, represented 6.2% of the NWT population in 2000 and 15.9% in 2022, which is a 158.5% increase as a proportion of the NWT population.
- Seniors, defined as persons 65 years and older, represented 4.1% of the NWT population in 2000 and 10% in 2022 which is a 142.8% increase as a proportion of the NWT population.
- In comparison, the total NWT population increased by 12.7% over this 22-year time period.

Figure 1: Population Estimates for those Aged 60 Years and Older, NWT, 2000 - 2022

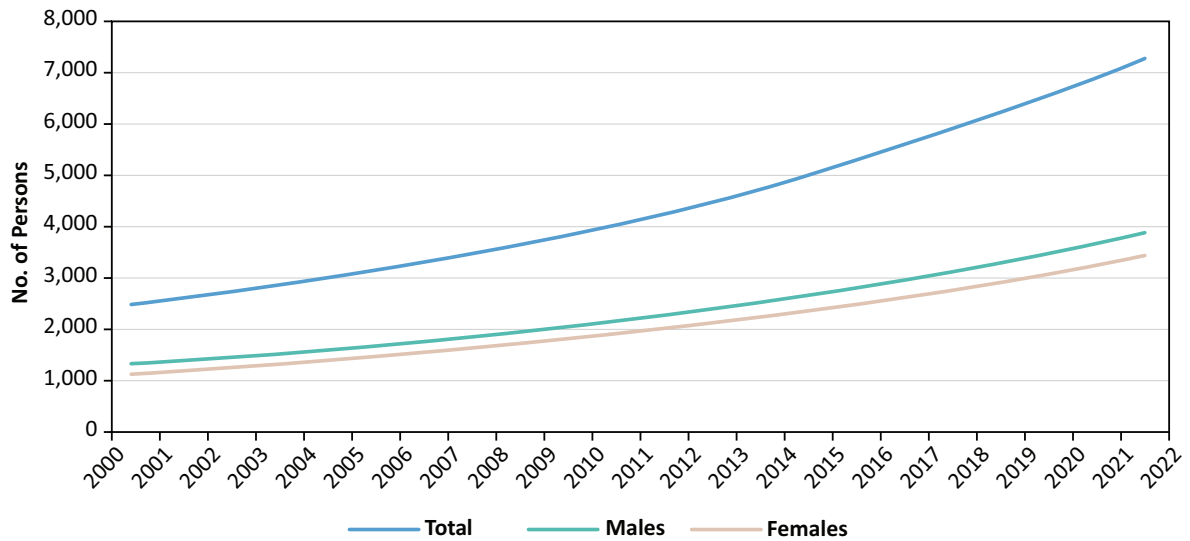
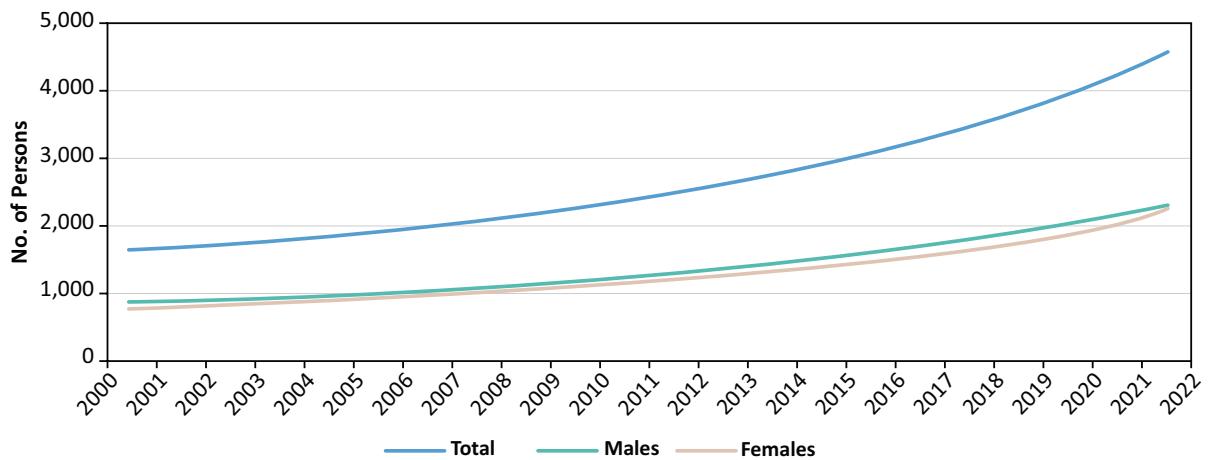


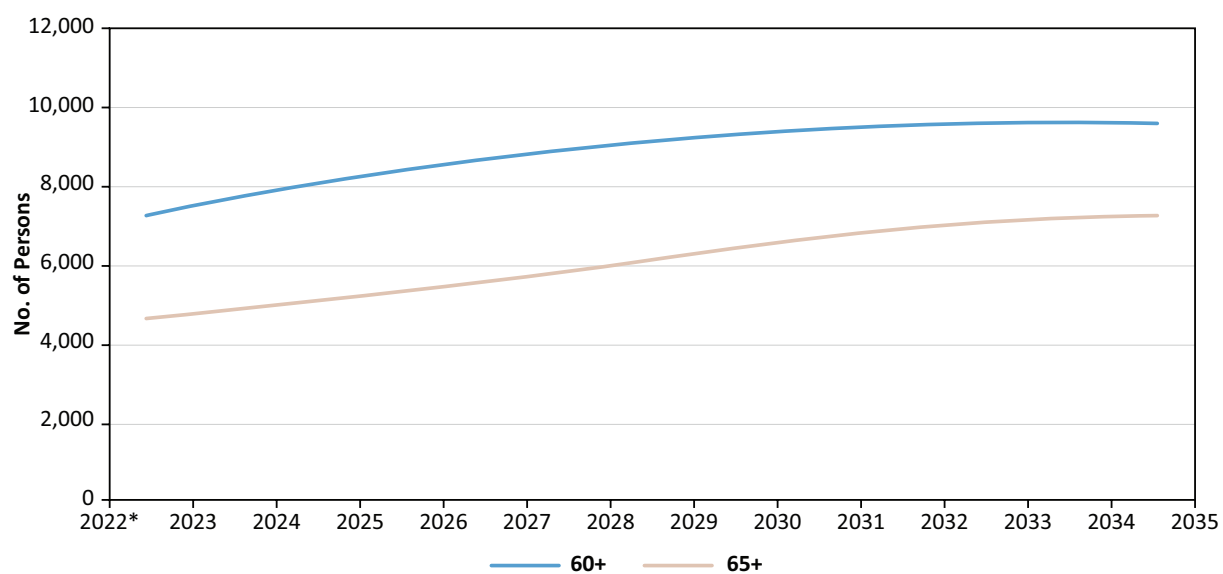
Figure 2: Population Estimates for those Aged 65 Years and Older, NWT, 2000 - 2022



The number and proportion of seniors in the NWT is anticipated to continue increasing from 2022 to 2035. Accordingly, the seniors (60+) population is expected to increase 32% by the year 2035 for a total of 9,600 seniors (60+) and represent 21% of the NWT population.

Additionally, the seniors (65+) population is forecasted to increase 59% by the year 2035 for a total of 7,250 seniors (65+) and represent 16% of the NWT population.

Figure 3: Population Projections for those Aged 60 Years and Older and 65 Years and Older, NWT, 2022 - 2035



Note: * Population Estimate

(Source: Statistics Canada, 2022)

Income and Employment

Income

Income is an important social determinant of health. Sources of income for seniors may include employment income, government payments (e.g., Employment Insurance, Old Age Security), income assistance payments, retirement savings, private pension plans, and other forms of income.

Income is recognized to be lower for seniors than working age adults. Having a lower income impacts a person's ability to pay for the basic necessities of life such as shelter, food, utilities, personal care, and clothing.

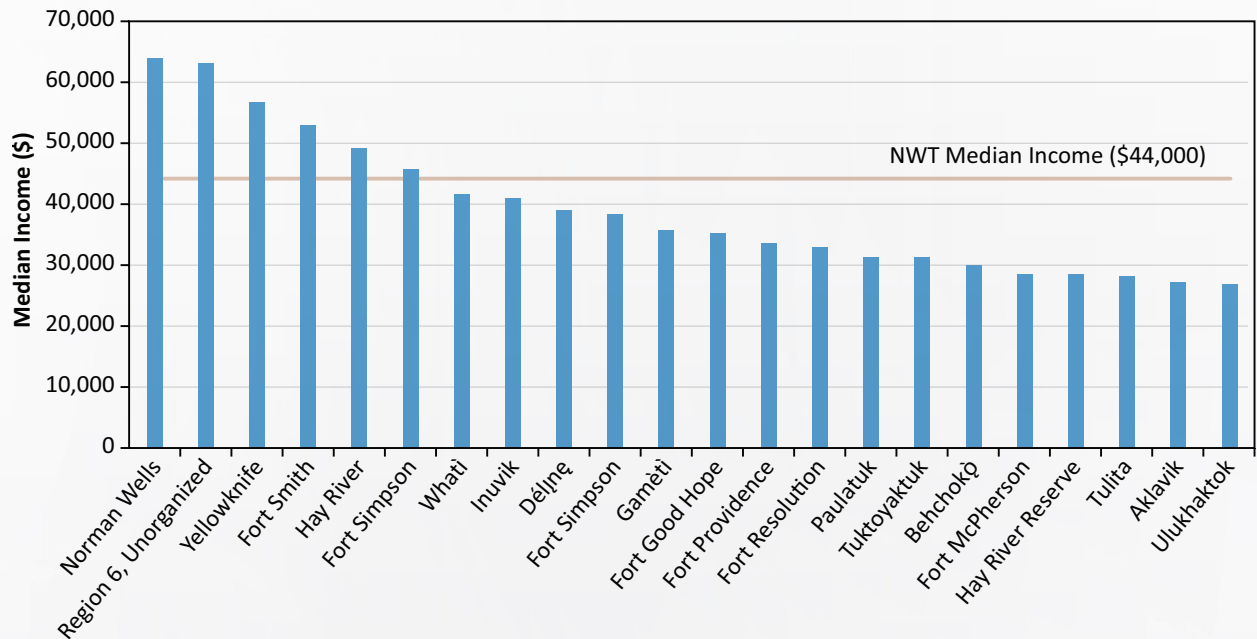
The median income of NWT residents varies over their lifetime and within and across regions of the territory. In 2020, the median income decreased from \$77,000 to \$44,000 when comparing residents 55 to 64 years to those 65 years and over; that is a decrease of \$33,000. Additionally, there are notable differences between Men+ and Women+ as well as within and between regions (see Appendix B for Regional Income Statistics by Age and Gender).

Income has a direct impact on a seniors' ability to age in place with dignity.

In the NWT in 2020, the median income of men, who are 65 years and over, was \$48,800 and it was \$40,400 for women who are 65 years and over; a difference of \$8,400. This meant that for every dollar a senior man had to spend on shelter, food, utilities or other necessities of life, a senior woman in the NWT had 83 cents.

The median income, for people 65 years and over in 2020, ranged from \$26,800 in Ulukhaktok to \$63,600 in Norman Wells which is a difference of \$36,800. That means that for every dollar a senior living in Norman Wells had to spend on shelter, food, utilities and other necessities of life, a senior living in Ulukhaktok had forty-two (42) cents. It should be noted that the cost of living varies by community and region, but the difference between median incomes by community is stark.

Figure 4: Median Income for Seniors 65 Years and Older, NWT, 2020



Data regarding seniors living in poverty is not available. Instead, Statistics Canada uses a low-income measurement which is not a measure of poverty, rather it identifies those who are substantially financial worse off than others. This data demonstrates that the percentage of persons living in low-income circumstances is higher within the senior population.

In 2020, 6.9% of persons aged 55 to 64 years in the NWT were living in low-income circumstances, while 8.7% of persons aged 65 years and over had a low-income in the territory. Additionally, it was found that those persons living alone were more likely to have a low-income, as follows: 19.9% of those persons aged 55 to 64 years and 23% of those persons aged 65 years and over in the NWT. (Source: Statistics Canada, 2021 Census).

Employment

It is often assumed that people will retire at age 60 or 65 and many do. However, many seniors continue to work full-time or part-time as demonstrated by the data below.

- 41.9% of seniors aged 60 years and over and 31.81% of seniors aged 65 and over continue to be employed either full-time or part-time.
- 31.8% of Indigenous seniors, aged 60 years and over, and 18.8% of Indigenous seniors, aged 65 years and over, continue to be employed.
- 45% of non-Indigenous seniors, aged 60 years and over, and 35.7% of non-Indigenous seniors, aged 65 years and over, continue to be employed.

(Source: Statistics Canada 2021 Labour Force Survey)

Income and employment data clearly indicates diversity amongst NWT seniors regarding their financial means. It also shows that seniors generally have less income to cover their costs. At the same time, the cost of living and inflation continues to put increasing pressures on seniors' ability to pay their bills. This in turn, diminishes the capacity of seniors to age in place with dignity as they are typically living on a fixed income.

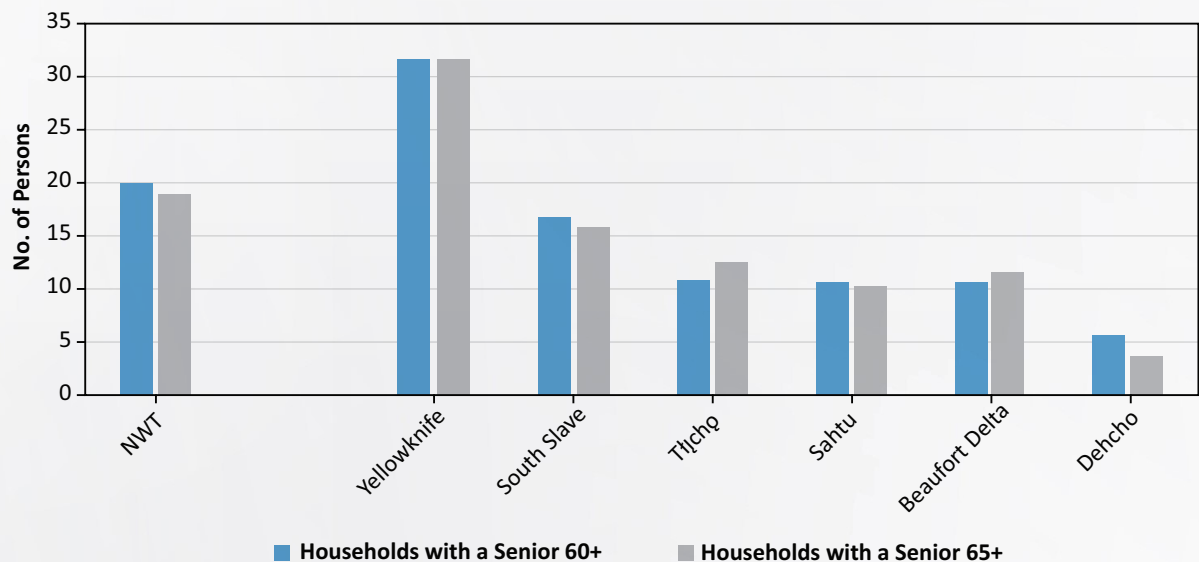
Housing

Shelter is a basic human need and an important social determinant of health. Housing problems, categorized as affordability issues, adequacy issues, and suitability issues, continue to exist across the Northwest Territories.

Affordability issues refer to “when shelter costs (like rent or mortgage payments, utilities, insurance, etc.) are more than 30% of the household income” (NWT Bureau of Statistics, 2022).

In the NWT, 19.9% of households with a senior 60 years and 18.9% of households with a senior 65 years and older had affordability issues in 2019.

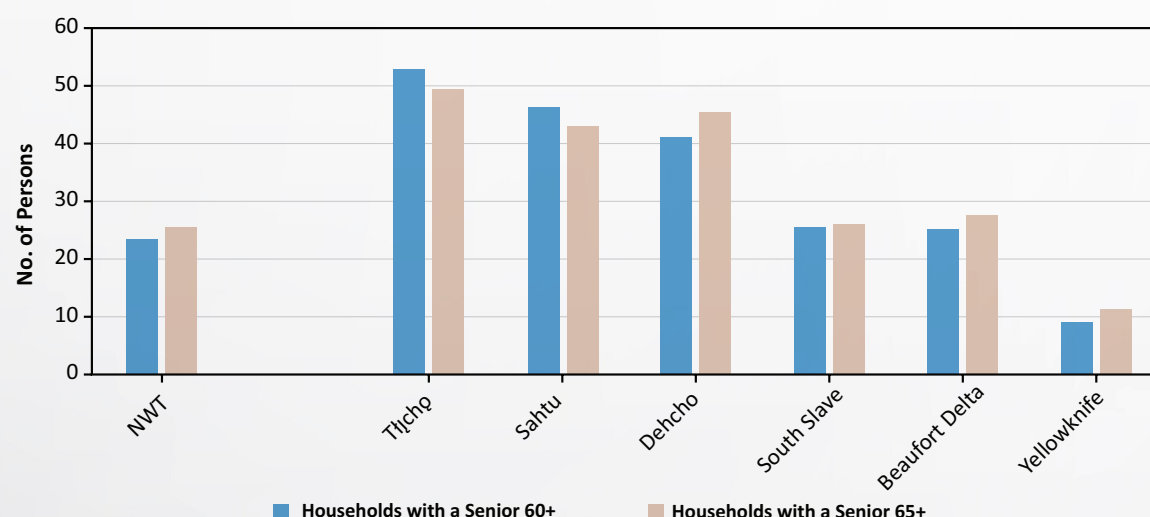
Figure 5: Percent of Households with Affordability Issues, NWT, Regions, 2019



Adequacy issues are “when houses require major repairs or are without running water or an indoor toilet” (NWT Bureau of Statistics, 2022).

In the NWT, 23.3% of households with a senior 60 years and 25.7% of households with a senior 65 years and older had adequacy issues in 2019.

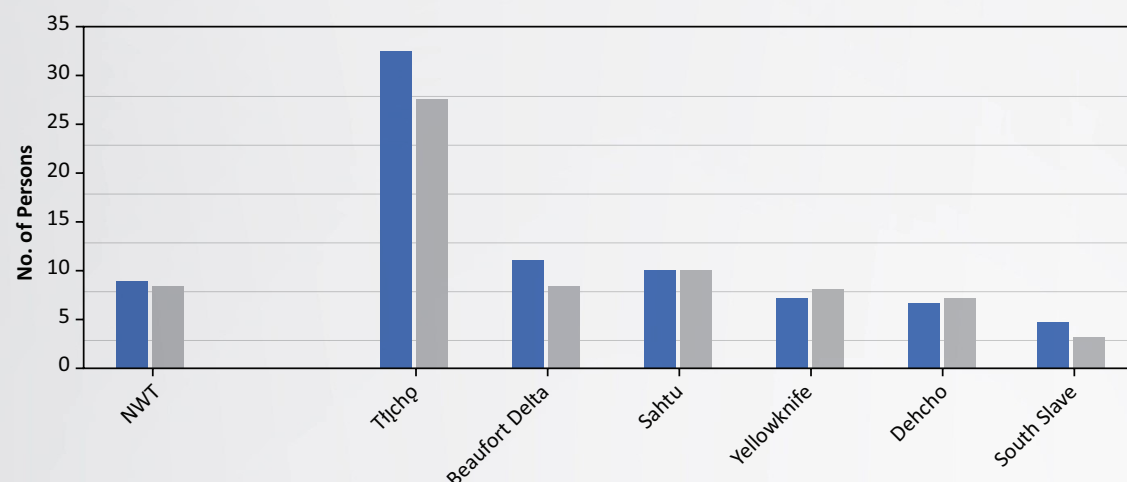
Figure 6: Percent of Households with Adequacy Issues, NWT, Regions, 2019



Suitability issues capture “when houses lack the suitable number of bedrooms for the characteristics and number of household occupants” (NWT Bureau of Statistics, 2022).

In the NWT, 9.0% of households with a senior 60 years and 8.5% of households with a senior 65 years and older had suitability issues in 2019.

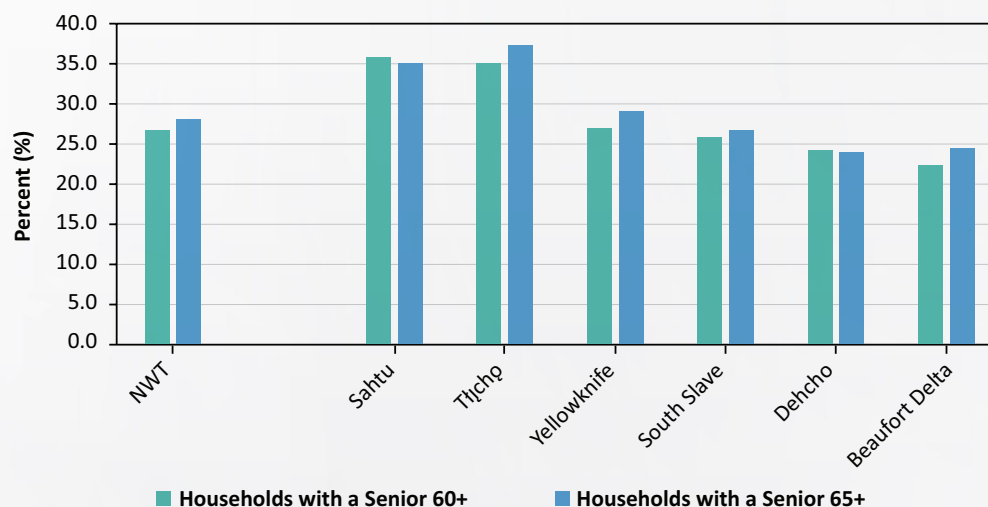
Figure 7: Percent of Households with Suitability Issues, NWT, Regions, 2019



A household is considered to be in core housing need when it is experiencing one or more of the above housing problems (affordability, adequacy, or suitability) and a total household income that is below the community core need income threshold.

In the NWT, 26.6% of households with a senior 60 years and older, and 28.1% of households with a senior 65 years and older were in core housing need in 2019.

Figure 8: Percent of Households in Core Housing Need, NWT, Regions, 2019



(Source: NWT Bureau of Statistics, 2019 NWT Community Survey)

Seniors across the territory raised concerns about their current housing with regard to affordability, adequacy, suitability, and accessibility, as well as options along the housing continuum or lack thereof to support aging in place with dignity. These concerns are reflected in the statistical data for the NWT.

Health Status

There are a variety of indicators that provide insights into the health and wellness of seniors, their abilities, access to primary health care, and their health and support service needs. These indicators include substance use, substance use hospitalization, self-ratings of health and mental health, and chronic disease. Indicators, such as substance use and chronic disease, have impacts on one's health and ability which in turn is seen in rising rates of disability and the need for more health care, support services, and accessible built environments.

Below is snapshot data of the status of seniors' health across various health indicators.

Figures 9 - 12: Seniors' Health Indicators

Substance Use +(2019-2020)			
65yrs +	Current Smokers	NWT: 22%	Canada: 9 %
	Heavy Drinkers	NWT: 14%	Canada: 8%
Substance Use Hospitalizations (2021-2022)			
65yrs +	Hospitalizations for harm caused by substance abuse	NWT: 126	Canada: 4
	(per 10,000) (excludes tobacco)		
Self-reported Health Status (2019-2020)			
65yrs +	Reporting general health as excellent or very good	NWT: 39%	Canada: 49%
	Reporting mental health as excellent or very good	NWT: 73%	Canada: 71%

(Source: Statistics Canada, 2019-2022, Canadian Community Health Surveys)

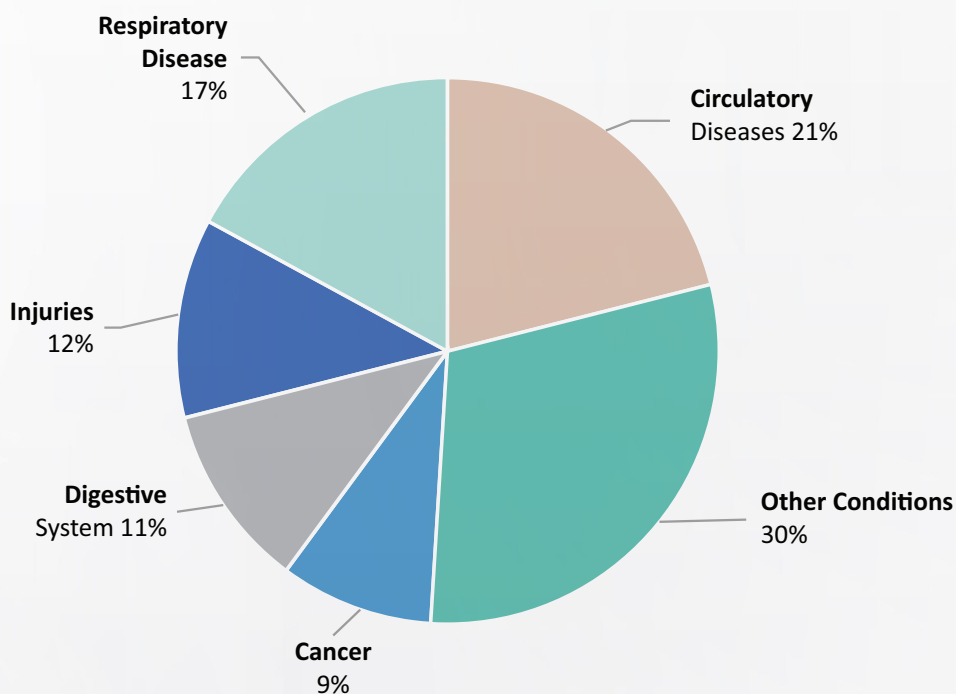
Chronic Disease (2016-2017)		
60yrs +	w/Asthma	NWT: 9%
	w/Chronic obstructive pulmonary disease (COPD)	NWT: 25%
	w/Diabetes	NWT: 25%
	w/Hypertension	NWT: 55%

Note: comparative Canadian data is not available

(Source: Public Health Agency of Canada, 2016/17 Canadian Chronic Disease Surveillance System)

NWT Seniors (65+) Hospitalization Data

Figure 13: Top Reasons for Hospitalization, NWT Average, 2017-18 to 2019-20

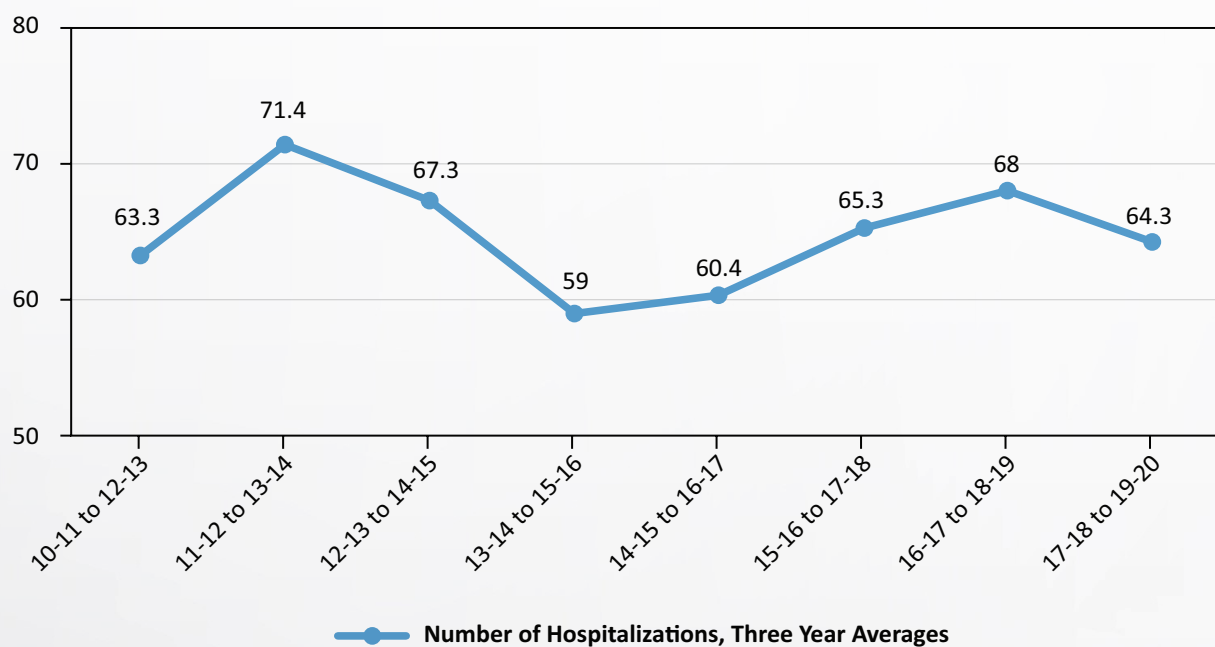


(Source: Canadian Institute for Health Information, 2022)

There is alignment on some of the leading causes for hospitalizations of NWT seniors with those across Canada, primarily seen in those with chronic health conditions.

The top five reasons for seniors' hospitalization in Canada, from 2020 – 2021, is as follows: heart; neurocognitive disorders; acute myocardial infarction; COPD and bronchitis; and other medical care e.g., palliative care, chemotherapy).

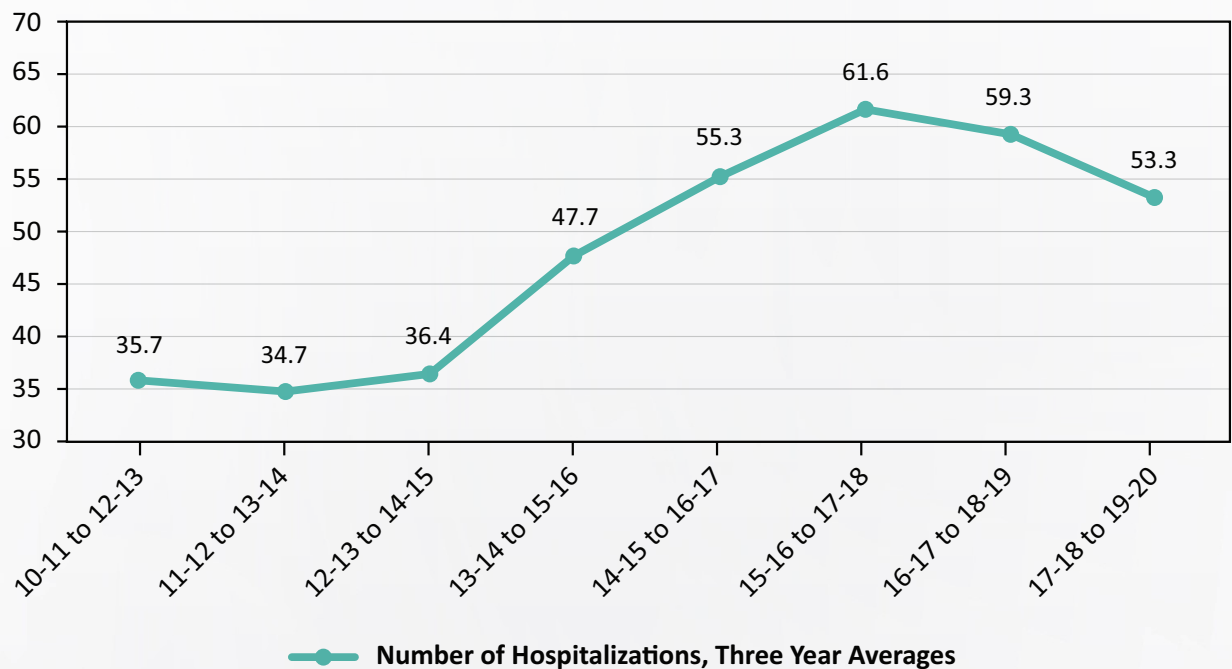
Figure 14: Hospitalizations for Ambulatory Care Sensitive Conditions, NWT Seniors



(Source: Canadian Institute for Health Information, 2022)

Ambulatory care sensitive conditions (ACSC) are those which, in general, could have been dealt with in an alternative setting (e.g., primary health care) avoiding hospitalization. This hospitalization data helps to measure seniors' access to primary health care.

Figure 15: Hospitalizations for Substance Harm, NWT Seniors



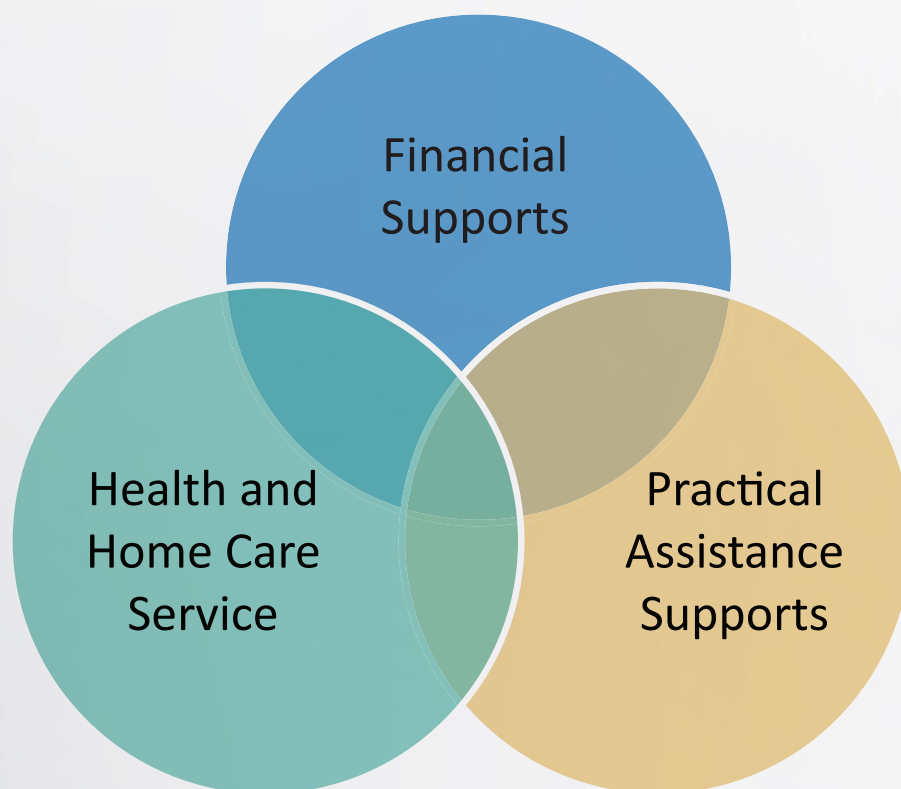
(Source: Canadian Institute for Health Information, 2022)

Substance harm hospitalizations are those which are the result of acute and/or chronic substance use (e.g., abuse/dependency, damage to liver/stomach etc.). Treating addiction issues in a hospital setting is expensive and not necessarily the best use of hospital resources and may also indicate that existing addictions treatment services are not meeting the needs of the patient. The rate of hospitalizations of seniors for substance harm in the NWT is significantly higher than the rest of Canada.

Seniors raised concerns about timely access to healthcare and mental health services in the territory for themselves, but also for family and community members. Seniors expressed that their healthcare needs are growing. They may also be dependent on others to access healthcare services in, or outside of, their community e.g., getting medications, getting to appointments, translation during appointments, medical travel.

A decorative illustration at the top of the page features a white line-art flower with several petals and a central circular pattern, set against a textured blue background that transitions from dark blue at the top to a lighter blue at the bottom.

Core Community Supports



The engagement activities to inform this Strategic Framework and research across Canada identify a variety of supports that are required to enable seniors to age in place with dignity (Carver et. al., 2019).

These core community supports can be captured within three primary categories which include financial supports, health and home care services, and practical assistance.

Financial Supports

The financial means of seniors varies greatly within and between communities and regions and is impacted by whether they remain employed or not. The financial means of seniors also differs between genders and if a senior is living alone or not. Furthermore, some seniors may have a healthy employer pension and other financial assets while other seniors may not. Accordingly, financial supports that factor in the diverse needs and means of seniors, incorporating a graduated approach, are required to enable seniors to age in place with dignity.

These financial supports may include:

- Income assistance programs
- Grants and benefits for low- and moderate-income seniors
- Tax credits for higher income seniors
- Financial assistance with home maintenance and home modifications

Health and Home Care Services

Health care services refer to a wide variety of services intended to prevent, diagnose, manage, treat, or cure and improve seniors' physical, psychological, social, and spiritual health and well-being.

These services include, but are not limited to:

- family doctors,
- nurse practitioners,
- nurses,
- pharmacists,
- telephone advice lines,
- mental health and rehabilitation services,
- dieticians, and
- specialists.

Home and Community Care Services, commonly referred to as Home Care, provide individuals with nursing care and support for personal care and daily living activities when they are no longer able to perform these activities on their own. These services help people to stay in their own homes rather than go to a hospital or long-term care facility when they need nursing care or help with daily living activities because of age, disability, injury, or illness.

Home care includes services such as:

- Home support for bathing and making meals
- Nursing services for wound care and health checks
- Help with organizing and taking medications
- Palliative care for those who are dying and want to be at home
- Loan of equipment, such as bathroom equipment or a walker
- Respite care to help out in the home, so caregivers can get a break

Practical Assistance Supports

As people age, they may require assistance with a variety of daily activities of life to enable them to age in place with dignity. Without this practical assistance, these activities may be difficult or impossible for the senior to complete on their own. The social interaction embedded in these practical assistance supports also helps to reduce social isolation and loneliness (Wister et.al., 2021). Social isolation is a risk factor for numerous negative outcomes, including poor physical and psychological health and elder abuse.

Seniors, older adults, families, caregivers, community organizations and governments, and Indigenous governments identified the following types of practical assistance seniors may require that are beyond the typical assistance provided by home care:

- Housekeeping (light and deep)
- Snow removal
- Chopping wood
- Grocery shopping
- Meal preparation
- Paying bills
- Laundry
- Transportation: getting to and from various appointments, shopping, paying bills, and recreational activities
- Wellness checks

Researchers have identified that “between 20 and 50 per cent of individuals on long-term care waitlists could potentially be diverted safely and cost-effectively to independent living with community and housing services if these services were available and affordable” (Williams et al., 2009).



GNWT Programs and Services for Seniors

The Government of the Northwest Territories offers a variety of programs and services which are typically designed and delivered to meet an identified need rather than a specific demographic. The GNWT released a Report on Seniors Access to Government of Northwest Territories Programs and Services in 2019.

This report was based on data from departments and agencies to develop a better understanding of the programs and services accessed by seniors. Accordingly, the report identified seventeen (17) programs and services accessed by seniors, in the 2017 – 2018 fiscal year, as follows:

Health and Wellness

- Extended Health Benefits for Seniors
- Home and Community Care Services
- Long Term Care

Housing

- Contributing Assistance for Repairs and Enhancements (CARE)
- Fuel Tank Replacement Initiative
- Public Housing
- Securing Assistance for Emergencies (SAFE)
- Senior Citizens' and Disabled Persons'
- Property Tax Relief
- Senior Home Heating Subsidy
- Seniors Aging-in-Place Retrofits

Income Assistance

- Income Assistance Program
- NWT Seniors Supplementary Benefit

Law and Victim Services

- Legal Aid Outreach
- Public Guardian Office
- Public Trustee
- Victim Services

Community Services

- Senior's Information Handbook
- Single Window Service Centres

The development of the Report on Seniors Access highlighted inconsistencies in data collection which “contributes to the difficulty of drawing conclusions about program access.” Program access was cross-referenced with calls to the NWT Seniors Information Line and on this basis, the report concluded a good alignment between GNWT programs and services and seniors’ needs. This report also indicated that GNWT provides similar programs as can be found in other jurisdictions and that spending on programs and services had kept pace with population growth. At the same time, the report stated that:

... it is difficult to draw any definitive conclusions about whether or not GNWT programs designed for or accessed by seniors are underutilized without a clear understanding of the needs for these programs. While some programs and services appear to have low usage (or usage varies widely from region to region), the key question is whether or not all of the seniors who require the service are accessing it. Further investigation is needed in order to determine whether low access rates are a result of programs that are not needed by seniors, or if it is a result of another factor, such as a lack of awareness for these programs or perhaps other barriers preventing access.

The GNWT does not have an agreed to definition of a senior and as such, there are age eligibility differences across programs and services. Departments and agencies do not collect data about seniors accessing programs and services consistently and, in some instances, not at all. Accordingly, the report highlighted various challenges and shortcomings related to “monitoring and evaluating program and service delivery to seniors” and identified this as an area for improvement.

Since the Report on Seniors Access, the GNWT has initiated a review of its housing program and its income security programs with the intent of better meeting the needs of residents. Additionally, the Canada-NWT Housing Benefit was launched in 2021. This benefit is co-funded by the federal and territorial government and helps with rental costs (for up to 2 years). This benefit is available to applications who are paying more than 30% of their gross income toward rent and is being accessed by seniors in the NWT. The GNWT also recently added the Paid Family/Caregiver Project and the Age-Friendly Community Grants. These two initiatives are in their pilot phase and do not have long-term funding.

Awareness of Existing Programs and Services

Community engagements to inform this Strategic Framework clearly indicated that seniors and other stakeholders are not necessarily aware of existing programs and services, how to access them, nor their eligibility criteria. Engagement activities also identified inconsistencies and gaps in the availability of these programs and services within and between communities. Questions were also raised about the fairness of the eligibility criteria to access existing programs and services and whether they are regularly adjusted for inflation.

A graduated approach for various supports was suggested as being more reasonable than a defined income cut-off to extend these supports to include low- and moderate-income seniors. These engagement activities as well as other reports identified the need for a full complement of the financial, health and home care services, and practical assistance supports to enable seniors to age in place with dignity.

Guiding Principles

The following principles are proposed to guide programs, services, and initiatives to enable seniors to age in place with dignity.



Strategic Framework

Development Process and Structure

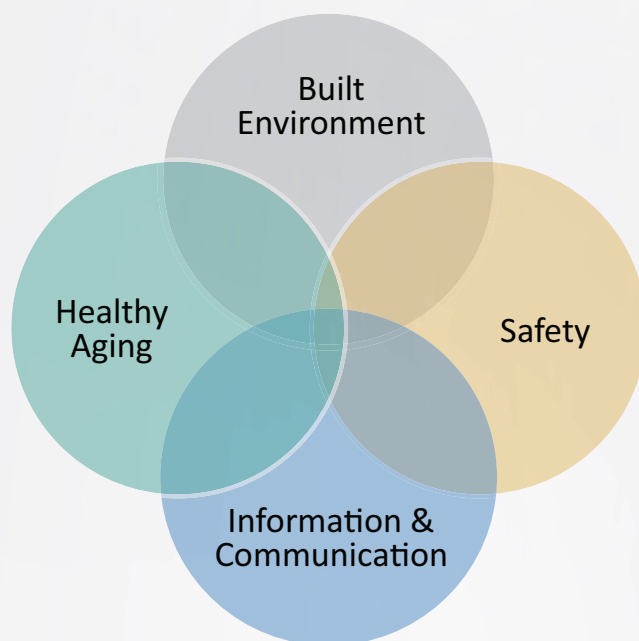
The Government of the Northwest Territories values seniors and is committed to advancing aging in place with dignity. The GNWT recognizes that a whole of government approach is necessary to advance aging in place with dignity and that individuals, non-profit organizations and the private sector also have a role to play. To reflect and honour this commitment, the GNWT has developed this Strategic Framework, informed by seniors and other stakeholders in the NWT and research, to provide guidance to ongoing and future efforts to advance aging in place with dignity.

Engagement activities were conducted with seniors, older adults, families and caregivers, Indigenous and community governments, and organizations serving seniors in the NWT in 2022. These engagement activities provided an opportunity to hear directly from seniors and other stakeholders about the current reality, including gaps and needs, and suggestions for advancing aging in place with dignity. The insights, examples, and feedback shared through these engagement activities are captured in Appendix A: What We Heard.

A review of relevant statistical data and literature occurred in parallel to the engagement activities. The research confirmed what we heard during the engagement activities and provided examples of programs, services, and other initiatives to advance aging in place with dignity. This research strengthened and helped to inform the areas of focus identified to enable seniors to age in place with dignity in the NWT.

The engagement activities and resulting findings, areas of focus, and Strategic Framework have been structured around four intersecting pillars: **the Built Environment, Healthy Aging, Safety, and Information and Communication.**

These four pillars are based on the eight interconnected domains of age-friendly communities first developed by the World Health Organization and since adopted around the world. Age-friendly communities support aging in place with dignity as they help seniors maintain good health, be involved in their communities, and to live safely.





Pillar 1

The Built Environment

The Built Environment refers to everything that is human made that supports one's daily life and activities.

The built environment includes housing and other buildings, roads and sidewalks, street lighting, open spaces and trails, transportation, and more. The built environment is the physical environment which may support or hinder aging in place with dignity. The vast geography of the territory and the many differences that exist within and between the built environment of communities as well as the territory's aging infrastructure are significant factors in a senior's ability and opportunities to age in place with dignity.

Housing

Seniors in the NWT are experiencing a range of housing problems, as identified by the housing data which directly impact their ability to age in place with dignity. These housing problems include affordability, adequacy, and suitability issues per the data and lived experience. The gaps in the housing continuum identified by seniors and other engagement participants included these housing problems and went beyond to include practical, social, and safety considerations.

During the engagement activities, seniors expressed an overwhelming desire to remain in their own homes as long as possible.

At the same time, they identified a need for additional supports to do so.

75%

of senior/older adult survey respondents indicated they want to stay in their homes as they age.

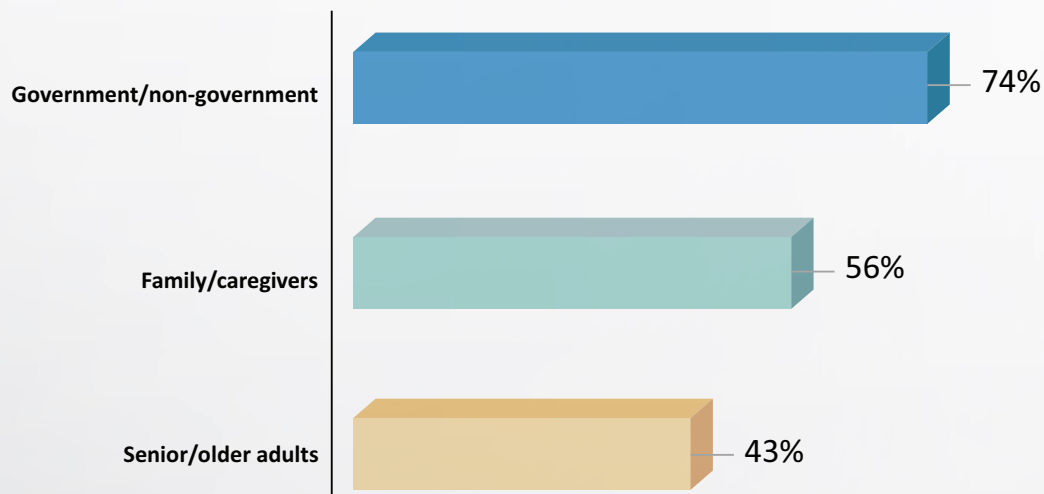
100%

of the senior/older adult survey respondents indicated they would require various supports to stay in their homes as they age.

Seniors also identified the need for various supports to assist them with the cost and the practical aspects of maintaining and modifying their homes.

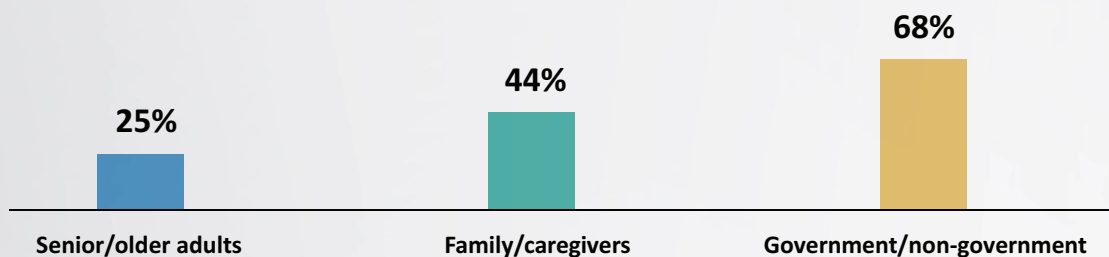
- 43% of senior/older adults, 56% of family/caregivers, and 74% of government/non-government survey respondents identified practical assistance with home maintenance, such as snow clearing and housekeeping, were critical factors in their ability to remain in their homes.

Figure 16: Need for practical assistance to age in place



- 25% of senior/older adults, 44% of family/caregivers, and 68% of government/non-government survey respondents identified that seniors would require financial assistance for home maintenance.

Figure 17: Need for financial assistance to age in place



- 25% of senior/older adult survey respondents indicated they would need financial assistance for aging in place modifications such as ramps, grab bars, shower/bath modifications to their home.

Gaps in the housing continuum in communities and across the territory impact the opportunities for and ability of seniors to age in place with dignity. Seniors live in, or want to live in, a variety of affordable, adequate, and suitable housing options ranging from single-detached homes to apartments to seniors' complexes, all with accessibility and other age-friendly considerations incorporated.

78% of government/non-government survey respondents disagreed or strongly disagreed that seniors in their community have accessible or affordable housing.

Shared spaces for activities and socializing as well as various supports and services within seniors housing complexes are important to their health and well-being. The location of seniors' housing is also important to support easy access to services and amenities and being safe.

Community Infrastructure

The physical infrastructure of the communities in the territory directly impacts the ability of seniors to age in place with dignity. The variability in community infrastructure across the territory is evident across buildings, roads, sidewalks, lighting, open spaces, trails, and beyond. Aging infrastructure also reflects past design standards which in turn impacts accessibility.

Seniors unequivocally stated that accessibility to and within buildings is critical to one's independence, dignity, and ability to participate fully in life.

59% of government/non-government survey respondents disagreed or strongly disagreed that buildings in their community were accessible.

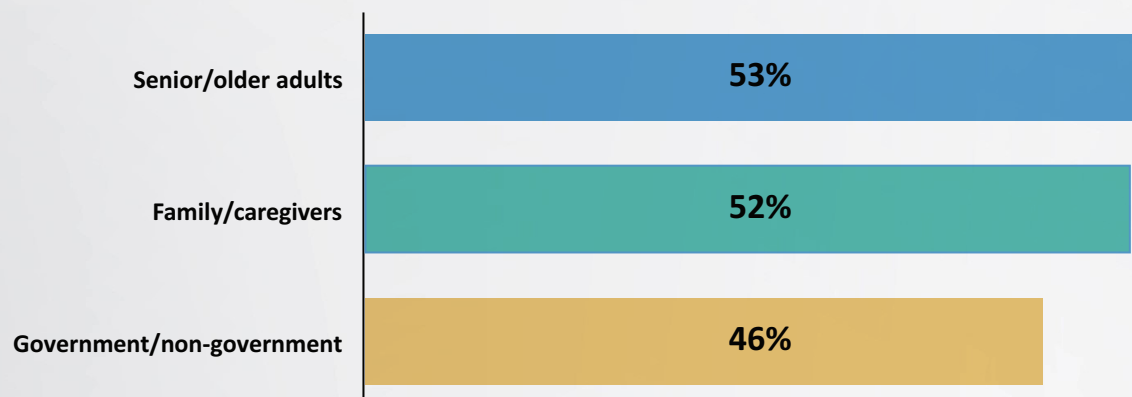
Discussions around accessible buildings included the need for ramps and elevators rather than stairs, as well as ensuring railings for ramps, steps, and stairs. Seniors regularly identified the importance of having accessible community space to support their ability to participate in recreational activities and socializing. In-kind contributions of community space were identified as ideal so that venue costs did not represent a barrier to being active and social nor take away from program dollars.

Roads and sidewalks, and their design and maintenance, also impact opportunities for seniors to safely and fully participate in life (Rosenberg et. al., 2022). Most of the engagement discussions about roads and sidewalks focused on their maintenance, in particular on snow and ice management. However, concerns about mobility and safety challenges created by the design and height of sidewalks and curbs were also raised. Uneven sidewalks, slopes and cracks may also impact mobility and increase the risk of slips, falls, and injuries. The lack of continuous sidewalks within communities and the lack of sidewalks and paved roads were also identified during the engagement activities as impacting the ability of seniors to participate fully and safely in life. Engagement participants also identified the importance of street lighting in their ability to safely get around their communities.

Transportation facilitates daily living activities and seniors participating in civic, recreational, cultural, and social activities (NIA, 2020). The lack of transportation is a barrier to seniors being independent, participating fully in life, and may also contribute to their social isolation and loneliness. Additionally, the state of roads and sidewalks, or the lack thereof, highlights the importance of transportation to overcome these barriers to participating and mobilizing within the community.

- 53% of senior/older adult survey respondents identified having their transportation needs met, 52% of family/caregiver survey respondents agreed, and 46% of government/non-government survey respondents identified the transportation needs of seniors as being met.

Figure 18: Transportation needs of Seniors met in their communities



The accessibility, availability, and adequacy of one's built environment – housing, public buildings, roads, and sidewalks, transportation, open spaces, and trails – can enable or hinder seniors aging in place with dignity.

Where Should We Focus?

Advancing aging in place with dignity as it relates to the built environment will require setting priorities, significant resources, and collaboration among all levels of government and community organizations; individuals and businesses also have a role to play.

- Adequate, affordable, suitable, accessible, and safe options along the housing continuum complemented by core community supports.
- Accessible buildings, roads and sidewalks, open spaces, and trails within communities.
- Affordable, accessible, and inclusive community transportation services.
- Accessible and age-friendly community spaces for recreational, cultural, and social activities for seniors.
- Alignment with principles of age-friendly communities.



Pillar 2

Healthy Aging

Healthy aging refers to the physical, mental, and social health and well-being of a senior which is multi-faceted and impacted by the social determinants of health.

The World Health Organization (2022) defines health as “the state of complete physical, mental and social well-being and not merely the absence of disease or infirmity.” Accordingly, healthy aging refers to the overall health and well-being of a senior which is impacted by the social determinants of health. Social determinants of health include, but are not limited to, income, housing, Indigenous ancestry, food insecurity, geography, disability, and gender (Raphael et. al, 2020). Healthy aging also acknowledges the importance of social inclusion, socioeconomic status, culturally safe and appropriate programs and services, physical and leisure activities, and access to health care services.

Income

Throughout the engagement process, seniors and older adults consistently raised concerns about their income, the rising cost of living, and the associated impacts on healthy aging and their ability to age in place with dignity. It is well-established that “income is perhaps the most important social determinant of health” (Raphael et. al. 2020). Accordingly, the impact of one’s income status can be seen across the four pillars of aging in place with dignity. Additionally, income is a significant determinant of other social determinants of health such as one’s health status, housing (affordability, adequacy, and suitability), food security and quality, and capacity to participate in physical and leisure activities.

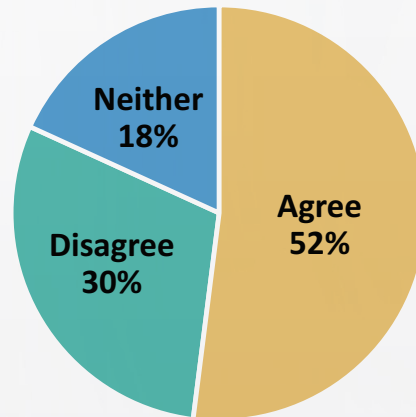
**“Lack of sufficient income after paying rent affects my diet, I cannot afford healthy food.
I have no money to participate in activities that would improve my quality of life.
I must always choose between my needs.”**

The realities of aging are that older adults are “more likely to have higher out of pocket health related expenses, to incur costs for assistance with a variety of activities, while at the same time having less disposable income” (Puxty et. al., 2019). Furthermore, lower income seniors are less likely to have their care needs met, to maintain their homes, buy necessities or engage in activities of social participation (Carver et. al., 2019).

While various financial assistance programs exist, seniors are not necessarily aware of these programs, and they can be difficult to navigate. Seniors also expressed concerns about the eligibility criteria and that these financial supports have not kept pace with inflationary increases.

- 52% of senior/older adult survey respondents indicated that their income was enough to cover their basic needs, whereas 30% indicated their income was insufficient to cover their basic needs, and 18% neither agreed nor disagreed.

Figure 19: Sufficient income to age in place, Senior and Older Adult Survey Respondents



- 42% of family/caregivers did not believe that seniors have enough basic income to meet their needs.
- 68% of government/non-government survey respondents believed that seniors did not have sufficient finances to age in their homes.
- 25% of senior/older adult survey respondents indicated that they will require rent supplements to stay in their current home.

**“Stuck in the middle-income situation, not enough disposable income but too much income to qualify for most programs.
I am a single income household and the costs here are so high.”**

Additional benefits and one-time payments were provided to seniors during COVID-19. The continuity and sustainability of these funds were raised as a concern by seniors during the engagement meetings. They saw how these funds helped to meet an existing need, a need that has not gone away. Canada has moved out of the pandemic phase of COVID-19 and into an endemic phase which has seen ongoing increases to the cost of living and concerns that a recession is next.

It should be noted that work is underway across several government departments to review income and financial support programs with the intention to enable seniors to age in place.

Social Connections and Inclusion

Social connections and activities are important contributors to one's mental health and wellness and sense of belonging in their community. The COVID-19 pandemic significantly impacted opportunities to interact with friends, family, neighbours, and the larger community which resulted in decreased social connections, increased social isolation, and feelings of loneliness (Wister & Kadowaki, 2021).

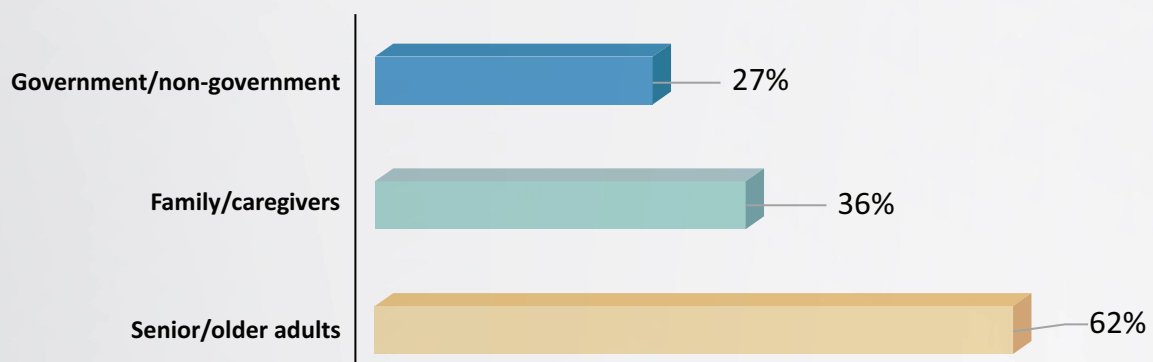
58% of government/non-government survey respondents indicated they were concerned about seniors living in their own homes being too isolated.

Social isolation and loneliness have negative impacts on the quality of life of seniors including depression and distress, poor physical health, and high mortality with those living alone or in poverty at a higher risk (Wister & Kadowaki, 2021).

62% of senior/older adults, 36% of family/caregivers, and 27% of government/non-government survey respondents indicated that seniors have enough opportunities to be with people in their communities. At the same time, community engagement participants indicated concerns for seniors living in their community who did not participate in social activities and seemed to stay at home all the time, especially for those living alone.

“Many seniors are left unheard and unseen by much of the community due to being isolated.”

Figure 20: Opportunities for Seniors to interact with people in their communities



Seniors across the territory identified a desire to connect with children and youth whether through formal or informal intergenerational programs. Unfortunately, COVID-19 negatively impacted such opportunities. Discussions were ongoing about resuming past intergenerational activities and creating new opportunities. The importance of seniors connecting with children and youth to share their culture, traditions, and knowledge was regularly highlighted.

- 54% of senior/older adult survey respondents indicated they had sufficient opportunities to interact with young people in their community.
- 40% of family/caregivers identified sufficient opportunities for seniors to interact with young people in their community and 27% of government/non-government survey respondents agreed.

While seniors and other engagement participants spoke to a re-emergence of social activities or planning for these activities to resume soon, there were numerous concerns raised. These concerns included the availability of space and staff or volunteers to support these activities, transportation, the financial means of seniors to participate in these activities, engaging seniors to participate, and the lingering fear and new habits formed due to COVID-19.

Volunteering was consistently identified as a means of being socially active in one's community. Accordingly, 73% of senior/older adult survey respondents agreed that volunteer opportunities were available to them in their communities. Seniors also spoke to the importance of family, friends, neighbours, buddy systems, and pets to their mental health and wellness, and their safety. At the same time, the fear and loss of so many friends and relatives due to the pandemic was identified by an engagement participant as a collective trauma for seniors.

“Mental health is often difficult to maintain when a senior is facing so much loss - loss of health, loss of ability, loss of family and friends. Also, seniors carry around more trauma than one would realize.”

Access to mental health supports was identified as a need for seniors, especially during periods of grief and loss which happen too frequently in the territory.

It is important, at this point in time, that the impact of COVID-19 on seniors' social connections, social isolation, and mental health and wellness is recognized. Addressing this reality through delivering a variety of programs and activities to socially engage seniors, including options that are regular, accessible, and affordable for seniors – combined with adequate resources, patience, and commitment – would be beneficial and support healthy aging and seniors aging in place with dignity.

“It is heartbreaking for me to be so isolated and struggling to survive at this stage in life when I have acquired so much knowledge and wisdom. I still have so much to give yet feel so undervalued, made worse by acute instability as well as my increasing inability to meet my own needs.”

Recreation and Physical Activity

Recreation activities are often a way to remain physically and socially active – both of which contribute to healthy aging. Thus, the engagement activities explored physical activity and recreation primarily with seniors/older adults, and with some service providers.

66%

of senior/older adult survey respondents identified that activities in their community were physically accessible to them with 30% of family/caregiver respondents in agreement.

55%

of the senior/older adult survey respondents considered the physical activity and recreation programs available to them were appropriate.

13%

of government/non-government respondents agreed that seniors had access to physical activity and recreation programs.

Seniors stated that COVID-19 restrictions, local staff resources and the availability of suitable space had impacted recreational programming. Many of them also identified transportation barriers to participating and more concerns about their ability to afford such activities.

Unfortunately, seniors also spoke to a focus on recreational programming for children and youth and feeling undervalued and overlooked in their community. At the same time, some great examples of recreational programming for seniors currently being offered, or in the planning stages, by community and Indigenous governments to meet this need were shared.

Health Care, Home Care, and Practical Assistance Supports

Seniors are living longer and healthier lives. As they age, their health needs become more complex, requiring a range of coordinated services either in clinical settings or at home. Accordingly, exploring healthy aging naturally included discussions around health care services, home care, and practical assistance supports to enable aging in place with dignity.

Health and home care services refer to those supports provided by regulated and non-regulated health professionals. Additional assistance can also come from family, caregivers, and volunteers. However, for the purpose of this document, “Health and Home Care Services” implies the involvement of a clinical professional. Access to these programs requires a clinical assessment to determine eligibility and the scope of services to be provided. While Home Care services are not specific to seniors, they do make up a large percent of the clientele.

During the engagement process, seniors expressed concerns about limited and/or disjointed access to health care services in the community and/or in the territory. The 2019 NWT Home and Community Care Review also highlighted this issue and the need to better define this service both for clients and service providers to ensure consistent and integrated delivery across the territory.

Seniors want person-centered, high quality, integrated care as close to home as possible by care providers who have the knowledge and skills to care for them. A shortage of health care professionals and the reliance on locums impacts the health and wellness of seniors, their family, friends, and the larger community.

52%

of senior/older adult survey respondents indicated they could access the health care services in their communities that they needed.

60%

of family/caregiver respondents to the survey indicated they were not confident in the health care services available for seniors.

Government/non-government survey respondents identified concerns about the adequacy of health services for seniors;

63% were not confident in the health care services available for seniors.

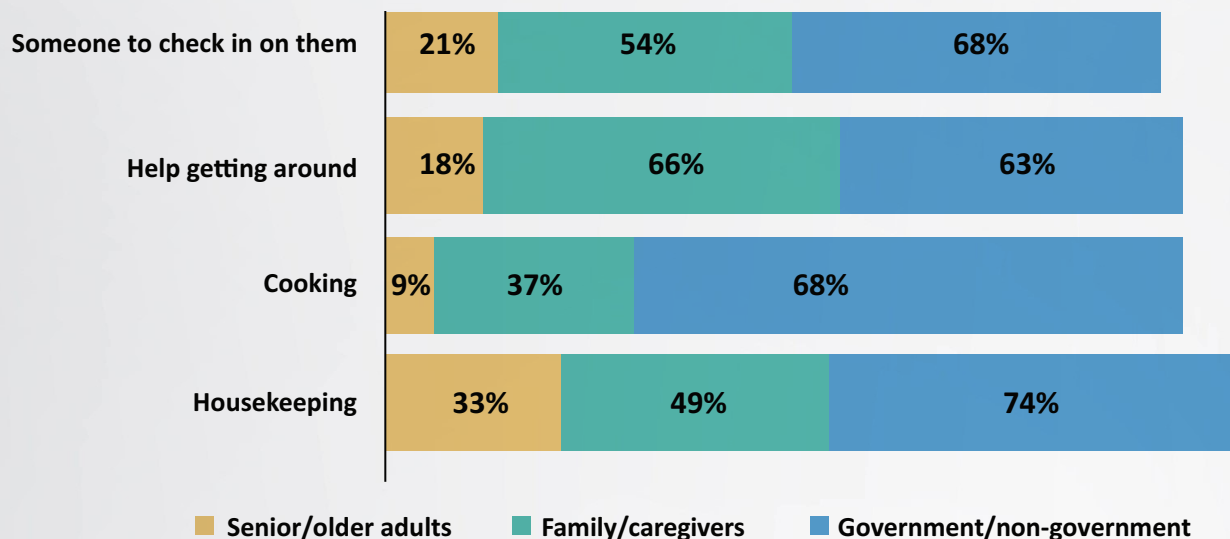
- 12% of senior/older adult survey respondents, 51% of family/caregiver survey respondents, and 68% of government/non-government survey respondents indicated that the senior needed or would need home care services to enable them to remain in their homes.
- 7% of senior/older adult survey respondents, 44% of family/caregiver survey respondents, and 68% of government/non-government survey respondents indicated that the senior would need personal care services to enable them to remain in their homes.

Providing care at home and in their community enables independent living rather than facility-based care. It is also a fiscally responsible approach as this service costs less than providing care in long-term care or assisted living settings (Carver et.al., 2019)

The current or anticipated need for home care services and practical assistance was regularly expressed during the engagement activities.

- 91% of family/caregivers expressed concern that as seniors age, they will require more support than can be provided by a caregiver and 75% are concerned that the supports required are not available in the senior's home community.
- 33% of senior/older adults, 49% of family/caregivers, and 74% of government/non-government survey respondents indicated the senior would require help cleaning their home.
- 9% of senior/older adults, 37% of family/caregivers, and 68% of government/non-government survey respondents indicated that seniors would require help to cook their food.
- 18% of senior/older adults, 66% of family/caregivers, and 63% of government/non-government survey respondents indicated the senior would require help getting to appointments, shopping, and community events.
- 21% of senior/older adults, 54% of family/caregivers, and 68% of government/non-government survey respondents indicated the senior would need someone to check in on them.

Figure 21: Types of Practical Assistance required to age in place



The needs identified to enable a senior to age in place with dignity are currently beyond the scope of home care, and the Home Care Review identified the need to better define the scope of services to ensure consistent delivery of this service. Family, caregivers, friends, volunteers, and various non-profits or businesses may provide some seniors with these practical assistance services.

However, there was much variability within and between communities regarding the availability, accessibility, and affordability of these practical assistance services. Additionally, seniors experiencing social isolation or living alone may experience challenges to age in place as those in this situation require a higher level of practical assistance support. Accessing practical assistance programs in addition to the service may also provide social connection (Carver et.al., 2019).

Challenges and inequities related to medical travel were also identified by seniors and stakeholders. As a person ages, their health needs become more complex. The NWT health care system may not be able to meet those needs; thus, requiring seniors to travel out of territory to seek care. The financial burden of medical travel was cited as a barrier to seniors.

**“Having to travel outside my community for medical appointments not available in my community is unaffordable. The per diems (while much appreciated) come nowhere close to covering the cost of any of the hotels in Yellowknife or elsewhere.
Near impossible to find meals with the per diem amounts.
I fear having to make the choice between health care and my living budget.”**

Where Should We Focus?

Healthy aging requires a holistic approach to the many facets that undermine or contribute to a senior's ability to age in place with dignity. COVID-19 highlighted and exacerbated the gaps in the programs and services that contribute to healthy aging. Advancing aging in place with dignity requires an acknowledgement of the work that has been done to date, ongoing efforts to improve the various programs and services, and a commitment to invest the required resources, to work together and coordinate our efforts, and to continue to advance programs and services that support aging in place with dignity.

- A range of financial supports to address the cost of living and financial barriers that undermine healthy aging of seniors.
- Affordable, accessible, age-friendly, and regular opportunities for seniors to be physically, mentally, and socially active.
- Health care, home care, and mental health services that are available, accessible, and meet the diverse needs of seniors in the territory.
- Practical assistance supports (non-medical) for seniors so they may continue to live at home.
- Human resource capacity and financial resources for sustainable programs and services for seniors.



Pillar 3

Safety

Safety refers to the right of seniors to be safe – safe in their relationships, in their homes, and in their communities.

Safety covers the many aspects of life that contribute to one's perceived and actual safety in their home and in their community. This includes built environments that mitigate the chance of slips, falls, and injuries. Safety is also supported by technical and legal advice as well as information, education, strategies, programs, and services to address online and phone scams and fraud, property theft, and neglect, violence, and financial abuse.

Built Environment

The built environment intersects with safety in a variety of ways and as such, can support or hinder being safe in one's home and in one's community. Community infrastructure can contribute to or mitigate the risk of slips, falls, and the resulting injuries. Ice and snow management, curbs, ramps, railings, elevators, ground floor entrance to buildings, and street lighting are examples of community infrastructure that contributes to one's physical safety. Similar design features in one's home and beyond, such as grab bars, showers/walk-in bathtubs, ramps, non-slip flooring and floor covers, contribute to one's physical safety at home.

"I have concerns with mobility as I get older - vision issues and a lack of depth perception make winters and uneven terrain hard to see."

The built environment can also facilitate or prevent financial abuse. A lack of transportation and/or inaccessible buildings may result in seniors giving their family members their bank card and PIN to buy groceries/other supplies, and to pay their bills. Seniors may also ask family to do their grocery shopping and put it on their store account. In doing so, the family member then has access to their bank account (or store account) and may take advantage of this in the form of financial abuse.

Personal and Property Safety

There was some variability in the responses to the survey questions around safety. This variability may be due to whom responded to the survey and the wording of the survey questions which also included questions around the ability to get around safely. It may also be due to the nature of a survey as the engagement sessions consistently identified a heightened sense of concern and vulnerability of and for seniors relating to their safety.

“We are very vulnerable as we age.”

78% of the senior/older adult survey respondents indicated that they felt safe where they lived while at the same time, 61% of them indicated that they were concerned about their safety as they aged. The majority of family/caregiver survey respondents indicated that they thought their senior was safe where they were living (64%) while 55% of them also stated that seniors had expressed concerns about feeling unsafe or vulnerable in their community. Additionally, 58% of government/non-government survey respondents indicated they were concerned that seniors living on their own were vulnerable to neglect or abuse, and 69% of these same respondents identified senior abuse and neglect as a concern in their community.

The reality is that seniors in the Northwest Territories experience the second highest rates of police-reported family violence in Canada and physical assault is the most common form of this violence (Statistics Canada, 2021). Additionally, engagement participants noted that financial abuse of seniors is all too common in the territory and is particularly noticeable on pension day and when seniors receive residential school payments. It was also sadly noted that some seniors only receive visits from their family on pension day or upon receiving a residential school payment. Financial abuse may result in a senior not being able to pay their own bills including, rent, utilities, and groceries. Engagement participants identified numerous reasons for financial abuse including inter-generational trauma, mental health and addictions, the financial position of the child/grandchild committing the abuse (ranging from no income to precarious or low-income), and multi-generational and often, over-crowded homes.

“Seniors living alone have family members who abuse them mentally, physically, emotionally and financially big time for various reasons especially when they get their old age pension.”

Increased dependency on family and caregivers as well as social isolation are risk factors for experiencing abuse and neglect (NIA, 2020; Wister & Kadowaki, 2021). This risk is further compounded for seniors with physical and cognitive impairments. Seniors typically experience abuse and neglect from family members and their caregivers (NIA, 2020; Wister & Kadowaki, 2021). Accordingly, seniors are often reluctant to report this abuse and may not know who can help them or what to do, and as a result, it may go undetected and unaddressed.

Seniors are also targeted by online and phone scams and fraud in the Northwest Territories and across Canada. In fact, “fraud is the number one crime against older Canadians” (Government of Canada, 2017). Seniors are targeted more and are particularly vulnerable to fraud and scams for a variety of reasons. These reasons include that they are more likely to be at home during the day, they are often more trusting when contacted by scammers/fraudsters, and they may be alone without support and a second opinion. Seniors’ knowledge and comfort with technology may also contribute to their increased vulnerability to fraud and scams.

Where Should We Focus?

Safety is multi-faceted and as such, there cannot be a focus on one aspect of seniors' lives. Accordingly, individuals, community organizations, businesses, and all levels of government have a role to play in creating safe homes and safe communities, and this will require commitment, resources, and a coordinated effort amongst all.

- Community infrastructure that contributes to safe built environments.
- The range of core community supports required for physically safe homes for seniors.
- Access to technical and legal advice regarding power of attorney, estate planning, and wills.
- Information, education, and supports to address elder abuse and personal, technology, financial, and property safety.
- Integrated programs and services for seniors to mitigate social isolation and loneliness, and to enhance personal and community safety.



Pillar 4

Information and Communication

Information and Communication refers to what information is shared and how it is shared to support seniors accessing the programs and services they need, for making informed decisions, and participating in recreational, social, and cultural activities.

Information and communication outlines how support programs, activities, news, and resources are shared with seniors, their families, and caregivers. It refers to sharing information in a way that is accessible and considers various communications mediums that acknowledge the diversity of needs and resources of seniors. We live in a world that is characterized by too much information, which may or may not be up-to-date and accurate, an increasingly fragmented and overwhelming system, and a reliance on sharing information via technology. Who is providing what program or service, if it is available at all, and the associated eligibility criteria may also vary from community to community; this results in a more complex system. The impact of this complexity is further compounded by language and literacy considerations.

“Communication is so important, and agencies certainly provide it online and in written form, but I believe face to face communication would make a big difference for seniors.”

The diversity of seniors’ resources and preferences is evident when considering information and communication. Those seniors/older adults who participated in the online seniors’ strategic framework survey have access to and a level of comfort in using technology. Accordingly, the majority of them indicated they used email (52%) and social media (83%) to read the news and to keep in touch. Additionally, 53% of seniors/older adult survey respondents indicated that they knew where to find services in their community when they needed help.

Whereas seniors who participated in the community engagement sessions typically pointed to not knowing where to find services nor how to access them. 44% of the family/caregiver survey respondents indicated that they did not know where to find services for the seniors in their lives and 48% indicated they did not know how to access these services; this was supported by community engagement discussions.

“Because of cost I have no cable or internet or home phone. I don’t hear about events because I have limited ways to hear about them.”

Information about programs, services and community activities are increasingly shared online. This results in barriers for seniors who may lack access to or knowledge of how to use technology which is especially pronounced for low to modest income seniors and for those whose first language is not English (Wister & Kadowaki, 2021). It is important to note that 21% of family/caregiver and 15% of government/non-government survey respondents also indicated that seniors did not have access to services in their own language.

During the community engagement sessions, seniors acknowledged that they had a role to play in being informed about activities, programs, and services. They made numerous suggestions about how to communicate this information to them, which includes:

- Use different communication methods to reflect the diversity of seniors: word of mouth, phone trees, local radio, social media, and posters.
- Ensure relevant information is appropriate to the audience and developed and shared at the community level.
- Offer regular, in-person activities for seniors that include food as these activities provide for social connection and an opportunity for in-person information sharing.
- Adopt a one-stop shop for seniors' approach.

Seniors, and other engagement participants, regularly identified the need for designated people to provide system navigation services. Regardless of the title for these designated people, there was an identified need for staff who are knowledgeable about seniors' programs, services, and issues. Additionally, these staff were viewed as a necessary resource to help access and navigate the system, to stay informed, and for some seniors, to act as an advocate and buffer from the system. It was communicated that existing programs and services seem fragmented and overwhelming and even more so for survivors of residential school.

“Currently there is little to no coordination between GNWT departments for services or programs offered to seniors.”

In addition to the above-mentioned factors, aging may impact people's communication skills due to “changes in physical health, depression, and cognitive decline. Aging may also impact physiologic changes in hearing, voice, and speech processes” (Rosenberg et. al., 2022). This can present additional challenges when accessing programs and services in terms of being understood, understanding information and what is being communicated to them, and one's comfort and confidence in engaging with the system.

Where Should We Focus?

The need to improve information for seniors and communications with seniors is evident, and there are many opportunities to do so. Accurate, timely, relevant, and accessible information communicated through various methods can support a senior aging in place with dignity. It can also support seniors accessing needed programs and services in a timely manner, making informed decisions, and participating in recreational and civic activities. Improved information and communications, to support aging in place with dignity, will require a commitment to do so, the necessary resources, and collaboration and coordination.

- A multi-medium and culturally safe approach to the delivery of information for and communications with seniors.
- Timely, accurate, relevant, and accessible information for seniors.
- Technology education and access to technology resources for seniors.
- System navigator services for seniors.
- Senior focused interagency, interdepartmental, and intergovernmental collaboration and coordination.

Glossary

Access – ensuring that seniors, their families, and their caregivers can easily find and use the information, services, and supports they need in a timely and efficient manner

Accessibility – the quality of an environment, program, service, or information that enables a person to use it with ease, regardless of whether they have a disability or not

Autonomy – ensuring that seniors are afforded the same rights and dignity as younger adults in making decisions and doing as much for themselves as circumstances permit

Average income – the total income for a population (e.g., seniors in a community) divided by the total number of people for that population which is also referred to as the per capita income

Collaboration – working together to enable seniors to age in place with dignity

Communication – the medium used to share information

Coordination – organizing the activities of everyone involved in a program, service, or initiative so that they work together efficiently and effectively, while ensuring they know what each other is doing

Cultural Safety – an outcome where Indigenous peoples feel safe and respected, free of racism and discrimination, when accessing health and social programs and services.

Diversity – recognizing and celebrating the unique characteristics of those individuals we refer to collectively as seniors

Enable – providing seniors with the opportunities, means, and authority to age in place with dignity

Equity – recognizing and responding with fairness to the distinct needs and circumstances of individual seniors through ensuring they have access to the necessary resources and opportunities

Inclusion – taking steps to create a welcoming environment so that people feel safe, respected, and heard, and to encourage a sense of belonging

Information – the content being communicated with the audience

Median income – the income amount at the midpoint; it divides the income for a group into two equal halves

Respect – demonstrating high regard for seniors as valued members of society

Additional note: Statistics Canada now uses the term Men+ and Women+ as the non-binary population is small and data aggregation to a two-category gender variable is a means of protecting the confidentiality of responses provided. In these cases, individuals in the non-binary population are distributed into the other two gender categories and are denoted by the “+” symbol.

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Appendix A – What We Heard

Background

The Government of the Northwest Territories (GNWT) values seniors and wants them to be able to age in place with dignity in the territory. The GNWT recognizes that to advance aging in place, it must work across all levels of government to address the core issues that impact seniors. The GNWT is advancing Mandate activities to support aging in place, including ensuring programs and services are in place, funding activities to advance age-friendly communities, and protecting seniors from abuse. The GNWT also committed to developing an NWT Seniors' Strategic Framework to guide actions to serve the diverse needs, interests, and abilities of seniors, and which use an integrated and person-centred approach to support the overall health and well-being of seniors in their communities and across the territory. This person-centered approach encompasses the physical, social, mental, emotional, and spiritual health and well-being of seniors, considers the social determinants of health of the individual, and recognizes the importance of both formal and informal support systems.

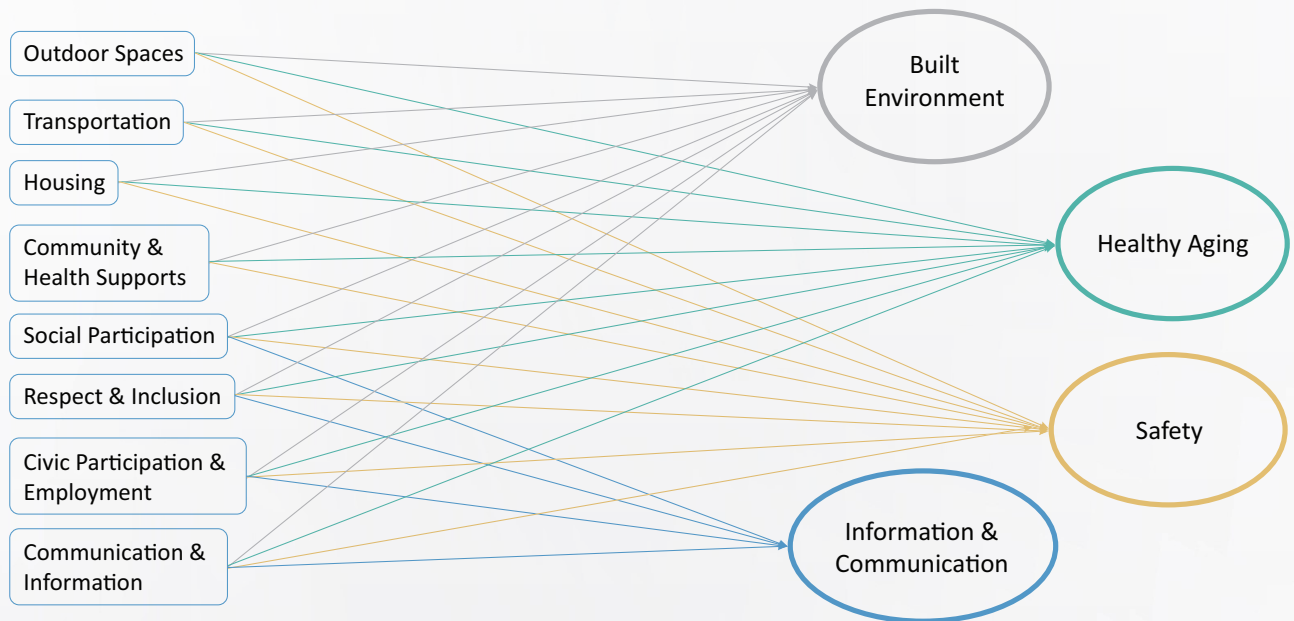
The Pillars to Enable Seniors to Age in Place with Dignity in the NWT

Aging in place means “having the health and social supports and services you need to live safely and independently in your home or your community for as long as you wish and are able” (Rosenberg et. al. 2022). Age-friendly communities support healthy aging and impact a seniors' ability to age in place with dignity. Accordingly, the concept of age-friendly communities and the associated eight, interconnected domains, first developed by the World Health Organization (WHO) in 2007 and since adopted around the world, were incorporated into the seniors' strategic framework engagement activities. These eight domains reflect the WHO's assertion that the health and well-being of seniors reflects the many aspects of their physical and social environment. Accordingly, the Public Health Agency of Canada defines age-friendly communities as those that “support older adults by designing policies, services and structures related to the physical and social environment in ways that help seniors live safely, enjoy good health and stay involved” (2015). The NWT Seniors' Strategic Framework survey and engagement discussion questions incorporated these eight domains into four intersecting pillars: the Built Environment, Healthy Aging, Safety, and Information and Communication to explore gaps in the system and what seniors need to age in place with dignity (Figure 1).

Figure 1

**World Health Organization
Age-Friendly Community Domains**

**Pillars to Enable Seniors to Age in
Place in the NWT**



Built Environment refers to everything that is human made that supports our daily lives and activities. The built environment includes housing and other buildings, roads and sidewalks, street lighting, open spaces and trails, transportation, and more.

Healthy Aging refers to the overall health and well-being of a senior which is impacted by the social determinants of health. Healthy aging also acknowledges the importance of social inclusion, socioeconomic status, culturally safe and appropriate programs and services, physical and leisure activities, and access to health care services.

Safety covers the many aspects of life that contribute to one's perceived and actual safety in their home and in their community. This includes built environments that mitigate the chance of slips, falls, and injuries, access to technical and legal advice, and education, strategies, and other measures to address online and phone scams, property theft, and financial abuse, neglect, and violence. It includes the many programs and services required to create and sustain safe communities.

Information and communication outlines how support programs, activities, news, and resources are shared with seniors, their families, and caregivers. It refers to sharing information in a way that is accessible, culturally safe, and considers various communications mediums that acknowledge the diversity of needs and resources of seniors.

NWT Seniors' Strategic Framework Engagement Activities

The engagement activities to inform the NWT Seniors' Strategic Framework were multi-faceted to reach as many people and organizations as possible given the vast geography of the NWT, the impact of COVID on the ability to gather in person, and the resources available. Accordingly, an online survey was launched in May 2022 and closed on October 31, 2022; 518 people completed the survey, either online or through paper copies distributed through government offices and community organizations. Seniors and older adults represent 85% of the survey respondents, family and caregivers represent 11.4% of the survey respondents, and government/non-governmental respondents comprised the remaining 3.6% of survey respondents.

In addition to the survey, community and virtual engagements were hosted beginning in April 2022 and concluding on October 31, 2022. Engagement invitations were extended widely, resulting in formal and informal discussions with representatives from Indigenous governments, community governments, service providers, and seniors' societies. Community engagement sessions with seniors and caregivers were hosted in Fort Providence, Inuvik, Norman Wells, Yellowknife, Behchokq, Fort Simpson, Hay River, and Fort Smith. These in-person engagement sessions provided for in-depth discussions around the four pillars of built environment, healthy aging, safety, and information and communication in relation to aging in place with dignity. All engagement activities included opportunities to identify concerns or suggestions not covered by the questions and dialogue.

While the engagement process provided a critical opportunity to hear from older adults, seniors, family/caregivers, and government/non-government organizations about aging in place, it is important to note the inherent selection bias that comes with a predominantly online survey. Paper copies with pre-paid envelopes were made available, there was limited respondent uptake.

Analysis of the survey data presented limitations of questions and a lack of continuity between the three different versions of questions. Data collection via online survey does not lend itself to the rich conversations that result from in person engagements. Survey results also showed a wide disparity between how seniors and older adults answered questions versus other respondents highlighting the differences between self-perception and observations.

Pillar 1: The Built Environment

Built Environment refers to everything that is human made that supports our daily lives and activities. The built environment includes housing and other buildings, roads and sidewalks, street lighting, open spaces and trails, transportation, and more. The built environment is the physical environment which may support or hinder aging in place with dignity. The vast geography of the territory and the many differences that exist within and between the built environment of communities as well as the territory's aging infrastructure are significant factors in a senior's ability and opportunities to age in place with dignity.

Housing

- Seniors expressed an overwhelming desire to remain in their own homes and in their own communities as long as possible; they may need additional financial, health and home care, and practical supports to do so. Some seniors indicated they may ultimately retire down south.
 - 75% of senior/older adult respondents to the survey indicated they want to stay in their homes as they age.
 - 100% of the senior/older adult respondents indicated they would require various supports to enable them to stay in their homes as they age.
 - 65% government/non-government survey respondents have concerns about seniors remaining in their homes as they age.
- The cost of maintaining their own home, including regular maintenance, aging in place modifications to make their homes easier and safer to live in, and heating, are common concerns/considerations/challenges.
 - 25% of senior/older adults survey respondents indicated that they would need financial assistance for aging in place modifications (e.g., ramps, grab bars, shower/bath modifications, etc.) to enable them to remain in their own homes.
 - Challenges securing trades people to do the work were also identified during the community engagements.
 - A back-log in modifications and/or renovations/retrofits through NWT Housing was identified during the community engagements.

- Seniors may require assistance – in the form of practical assistance or financial support to secure this secure - with home maintenance type activities now and in the near future.
 - Home maintenance support was identified by all respondents as a critical factor for seniors to remain in their own homes as follows:
 - > 43% of senior/older adult survey respondents
 - > 56% of family/caregiver survey respondents
 - > 74% of government/non-government survey respondents

These activities include snow clearing, chopping wood and deep housekeeping (fall/spring cleaning).

- Financial support to assist with home maintenance was also identified as a need as follows:
 - 25% of seniors/older adults
 - 44% of family/caregivers
 - 68% of government/non-government survey respondents
- Gaps in the housing continuum exist and impact seniors' ability to age in place with dignity. Seniors, older adults, and other stakeholders made numerous suggestions around addressing this gap.
 - Seniors need affordable, adequate, suitable, and accessible housing. 78% of government/non-government survey respondents disagreed or strongly disagreed that seniors in their community have accessible or affordable housing.
 - When we delved into the details of what seniors want, they identified the need for 2-bedrooms in whatever home they downsize into as critical – for the space and to accommodate visitors (social connections and/or help with daily activities of life).
 - If seniors find themselves moving into an apartment building, they identified the importance of being on the ground floor or second floor for safety reasons. In the event of a fire, seniors want to be able to get out without waiting for someone to retrieve them.
 - 58% of government/non-government survey respondents were concerned that seniors' homes do not meet their current needs.

- The seniors' housing continuum should include seniors' complex for independent living with shared spaces for activities and socializing as well as various core community supports.
 - > 51% of senior/older adult survey respondents currently live with their spouse/partner. Engagement participants overwhelming stated the importance of continued cohabitation of spouses and that options along the housing continuum support that.
- Essentially seniors want to see the development of aging in home – in the right place – facilities in their communities.
- The location of seniors' housing matters.
- Concerns were raised that regional long-term care may mean the senior must move away from family and community; relevant feedback included the following:
 - Cost of travel for family to visit elder in long-term care facility and the associated frequency of visits
 - Social isolation
 - Loss of connection to community
 - Cultural considerations including food, language, and traditional activities

Community Infrastructure

- Stakeholders shared that accessibility to public and private buildings is critical to one's dignity, independence, and ability to participate fully in life.
 - Additional note: if there is only one parking spot for people with disabilities and an event is being hosted for seniors, one spot is likely to be inadequate with the resulting consequences.
- 59% of government/non-government survey respondents disagreed or strongly disagreed that buildings in their community were accessible.
- The importance of having space available for seniors' programs and activities was iterated across the territory. In-kind contributions of space for seniors' programs and activities were identified as ideal and highly beneficial.
- Seniors and other engagement stakeholders stated that universal design benefits everyone. (Examples of universal design include ramps, curb cuts, automatic doors, etc.).

Roads, Sidewalks, and Outdoor Spaces

Seniors and other engagement stakeholders shared concerns about the walkability and move-ability within their communities. Due to the late fall timing of the sessions, the impact of winter (snow and ice) and getting around was a common topic of discussion. It should be noted that not all communities have sidewalks or pathways for safe foot traffic, but for those with this infrastructure there was an overall dissatisfaction with the care and maintenance of these assets. Other road and sidewalk concerns raised by seniors include:

- Curbs may pose a challenge for seniors even if they are not in a wheelchair or using a cane or walker.
- Roads are not paved in all communities. Unpaved roads result in dust which may impact breathing and impacting the walkability of a community for seniors.

Limited commentary on outdoor spaces and was collected throughout the engagement. Items most consistently heard were:

- Accessibility – gravel walkways or trails present challenges for those using mobility aid and depending on weather conditions walking poles may be required for additional stability.
- Safety – poor lighting, particularly for trails and sidewalks, and the locations can create an added safety risk for seniors.
- A lack of age-friendly design : rest places (benches) along trails were identified as being important for supporting the use of trails and other open spaces by seniors, along with consideration for the distance between these resting places.

Perceptions of safe movement outside was asked of senior survey respondents both currently and as they age. 73% agreed they can currently move around safely outside. However, when asked the same question, in the context of future needs, that number dropped to 43%.

Additionally, 69% of family and caregiver respondents reported concerns that seniors will not be able to get around safely outside as they age.

Transportation

- Transportation or the lack thereof – and its impact on seniors' independence, daily living activities, and ability to participate in recreational and social activities was a theme throughout the engagements.
- In those communities with transportation, seniors typically identified the relevant vans as being specific to seniors registered with programs, e.g., home care, long-term care and that they were not for general use (driver and insurance).
- The cost of transportation was regularly identified as a consideration and/or barrier by seniors as was vehicle accessibility.
- 53% of senior/older adult survey respondents identified having their transportation needs met, 52% of family/caregiver survey respondents agreed, and 46% of government/non-government survey respondents identified the transportation needs of seniors as being met.

Accessibility of one's built environment enables aging in place with dignity and the lack thereof presents a barrier to doing so.

The built environment can facilitate or hopefully mitigate or prevent financial abuse. A lack of transportation and/or inaccessible buildings may result in seniors giving their family members their bank card and PIN to buy groceries and/or other supplies, and to pay their bills. Seniors may also ask family to do their grocery shopping and put it on their store account. In doing so, the family member then has access to their bank account (or store account) and may take advantage of this in the form of financial abuse.

Pillar 2: Healthy Aging

Healthy Aging refers to the overall health and well-being of a senior which is impacted by the social determinants of health. Social determinants of health include, but are not limited to, income, housing, Indigenous ancestry, food insecurity, geography, disability, and gender (Raphael et. al, 2020). Healthy aging also acknowledges the importance of social inclusion, socioeconomic status, culturally safe and appropriate programs and services, physical and leisure activities, and access to health care services.

Income

- Both survey respondents and engagement session participants shared grave concerns about the cost of living and how it impacts aging in place. Seniors and older adults noted that it is no longer affordable to remain in the territory and that constant compromise is common and a detriment to healthy.
 - 30% of senior/older adult survey respondents indicated they did not have enough income to meet their basic needs with 18% neither agreeing nor disagreeing with this assertion.
 - 68% of government/non-government survey respondents were concerned about seniors lacking finances as they age in their home.
 - 42% of family/caregivers do not believe that seniors have enough basic income to meet their needs.
 - 46% of government/non-government survey respondents did not agree that seniors have access to the kinds of food they need.
- Engagement session participants noted the cost of participation in programs or events as a hinderance. For those communities with local seniors' societies, organizing and providing activities for seniors becomes unmanageable due to costs (food, venue rental, etc.).
- The impact of cost of living was discussed under each of the pillars during the engagement sessions. It impacts all aspects of seniors being enabled to age in place.
- On multiple occasions, seniors during the engagement sessions raised concerns on whether current support programs and subsidies for seniors shift in accordance with inflationary increases with the fear they are "being short changed".

"I am still working full time making a good salary, but I live pay cheque to pay cheque. Turning 65 in 2 months, I am very aware that I cannot afford to retire here."

“Lack of sufficient income after paying rent affects my diet, I cannot afford healthy food. I have no money to participate in activities that would improve my quality of life. I must always choose between my needs.”

“Because of cost I have no cable or internet or home phone. I don’t hear about events because I have limited ways to hear about them.”

“Stuck in the middle-income situation, not enough disposable income but too much income to qualify for most programs. I am a single income household and the costs here are so high.”

“With the recent increases in food, consumables, gas, etc. what little I could afford to do, which has been next to nothing over the past two years, has been reduced even more.”

Social Connections and Inclusion

- Social connections contribute to mental health and wellness. 62% of seniors/older adults, 36% of family/caregivers, and 27% of government/non-government survey respondents indicated that seniors have enough opportunities to be with people in their communities.
- Seniors across the territory identified a desire to be connected with children and youth. Once again, COVID had negatively impacted such opportunities and opportunities varied. Discussions were ongoing about resuming past opportunities and creating new opportunities. The importance of elders connecting with children and youth to share their culture, traditions, and knowledge was highlighted.
 - 54% of senior/older adult survey respondents indicated they had sufficient opportunities to interact with young people in their community.
 - 40% of family/caregivers identified sufficient opportunities for seniors to interact with young people in their community and 27% of government/non-government survey respondents agreed.

“I’ll just google it granny, is what my grandson says to me. I tell him, why are you googling when I actually lived it!?”

- There appear to be seniors who rarely leave their home and/or do not leave their home and/or do not have family in their lives/community. The importance of mental wellness check-ins, by non-medical people, was consistently identified.
- Family, friends, buddy systems, and/or pets were identified as important to mental health and wellness and safety.
- Volunteering was consistently identified as a means of being socially active in one's community.
 - 73% of senior/older adult survey respondents agreed that volunteer opportunities were available in their communities.
- Access to mental health support for seniors was identified as a need, in particular during periods of grief and loss.
- Government/non-government survey respondents expressed concerns about isolation and connection. 58% worried seniors would become too isolated.

“Mental health is often difficult to maintain when a senior is facing so much loss - loss of health, loss of ability, loss of family and friends. Also, seniors carry around more trauma than one would realize.”

“Many seniors are left unheard and unseen by much of the community due to being isolated.”

During the engagement sessions, some seniors identified feeling not heard or valued and experiencing ageism. This was echoed by seniors and older adults who responded to the survey as 47% felt valued and 16% of them indicated they did not feel valued; 27% indicated they sometimes felt discriminated against because of their age.

“During COVID, we got the sense that lots of people preferred to let older people die rather than live with pandemic restrictions. There needs to be more public education on the value of elders.”

“It is heartbreaking for me to be so isolated and struggling to survive at this stage in life when I have acquired so much knowledge and wisdom. I still have so much to give yet feel so undervalued, made worse by acute instability as well as my increasing inability to meet my own needs.”

“Let’s get rid of the stereotype that seniors can’t keep up with technology or don’t understand how things work. I’d love to work till I’m 90 if there was a position in the community that valued my wisdom and wasn’t just making me the token senior in the organization.”

“Rather than just informing people about ageism, it’s important to create a societal shift that sees seniors as necessary because they have skills, not just because they are old.”

“They treat me like I’m old, but I understand, I haven’t forgotten, I know why I’m here and what I can contribute.”

“Sometimes I hear, can you just act like an elder! What does that even mean?”

Physical Activity

- Seniors do not necessarily have hobbies or regular activities prior to retirement, and this may pose a challenge as they transition from the work world to retirement with regard to healthy aging.
 - Only 13% of government/non-government survey respondents agreed that seniors in their communities have access to physical activities and recreation programming.
- Seniors typically identified inadequate opportunities to remain physically, mentally, and socially active.
- There seemed to be more opportunities to be active and connected in communities with local seniors’ societies, acknowledging that not all seniors participate nor engage with their seniors’ societies nor their activities. During the engagement process it was confirmed that only 4 of the 33 communities have their own societies.
- Seniors identified financial, accessibility, and transportation barriers to participating in healthy aging activities.
- The regularity of activities for seniors was identified as important, so that seniors know what is happening when and where and to support these activities becoming a habit.

- Seniors and older adult survey respondents agreed there were accessible (65%) and appropriate (55%) physical activity opportunities in their communities. Barriers with transportation and registration costs continue to impact actual participation. In contrast, 48% of family/caregiver survey respondents did not consider physical activity opportunities in the community to be accessible.
- Gaps were identified regarding physical space and resources (funds, staff/volunteers, supplies, food/light refreshments, information sharing, etc.) for seniors' activities. There were also great examples of Indigenous Governments and community governments filling these gaps shared throughout the engagements.
 - 81% of government/non-government survey respondents agree there are service gaps for seniors in their communities.

Health Care, Home Care, and Practical Supports

Seniors also require assistance now or in the future with daily activities of life such as grocery shopping, paying bills, preparing meals, laundry, light housekeeping, and getting to and from appointments, shopping or community activities, and someone to check in on them. In addition, health care services and personal care services were identified as assistance that would be required by seniors to continue to age in their homes with dignity.

Daily activities of life services to support aging in place survey responses:

- 33% of senior/older adults, 49% of family/caregivers, and 74% of government/non-government survey respondents indicated the senior would require help cleaning their home
- 9% of senior/older adults, 37% of family/caregivers, and 68% of government/non-government survey respondents indicated that seniors would require help to cook their food
- 18% of senior/older adults, 66% of family/caregivers, and 63% of government/non-government survey respondents indicated the senior would require help getting to appointments, shopping, and community events
- 21% of senior/older adults(Q19), 54% of family/caregivers, and 68% of government/non-government survey respondents indicated the senior would need someone to check in on them

Health care and personal care services to support aging in place survey responses:

- 12% of senior/older adult survey respondents, 51% of family/caregiver survey respondents, and 68% of government/non-government survey respondents indicated that the senior need or would need home health care services to enable them to remain in their homes.
- 7% of senior survey respondents, 44% of family/caregiver survey respondents, and 68% of government/non-government survey respondents indicated that the senior would need personal care services to enable them to remain in their homes.
 - Practical assistance supports most commonly provided by family/caregiver survey respondents are:
 - > Companionship, shopping/errands, transportation, and housekeeping.

“The NWT needs more mid-level supports. It’s either you don’t need assistance, or you need long term care. There are no in between supports.”

“I want to do what I can for myself for as long as I can.”

- During the engagements, seniors expressed concerns about limited and/or disjointed access to health care services in the community and/or in the territory. The health care shortage and the reliance on locums impacts the health and wellness of seniors, their family, friends, and the larger community.
- Government/non-government survey respondents identified concerns about the adequacy of health services for seniors; 63% were not confident in the health care services available for seniors.
- 52% of senior/older adult respondents to the survey indicated they could access the health care services in their communities that they needed.
- 60% of family/caregiver respondents to the survey indicated they were not confident in the health care services available for seniors.
- 91% of family/caregivers expressed concern that as seniors age, they will require more support than can be provided by a caregiver and 75% are concerned that the supports required are not available in the senior’s home community.

- Challenges and inequities related to medical travel were also identified by seniors and stakeholders. As a person ages, their health needs become more complex, and the NWT health care system may not be able to meet those needs thus requiring seniors to travel out of territory to seek care. The financial burden of medical travel is a barrier to seniors remaining in the NWT to age.

“Having to travel outside my community for medical appointments not available in my community is unaffordable. The per diems (while much appreciated) come nowhere close to covering the cost of any of the hotels in Yellowknife or elsewhere. Near impossible to find meals with the per diem amounts. I fear having to make the choice between health care and my living budget.”

“If you need medical treatment outside of Yellowknife, are you in a position to pay for it?”

COVID Impact

- Activities and social connections were significantly impacted by covid with potentially long-term impacts. There was an expressed eagerness for these activities to resume and at the same time, the identification of the challenges of getting seniors to leave their homes and participate in activities as well as the recognition that new habits have formed during covid. Those activities for seniors that had resumed were seeing slow uptake and had not met pre-covid numbers.
- The loss of so many friends and relatives due to covid and the fear experienced by seniors was identified as a collective trauma for this age group.

Pillar 3: Safety

Safety covers the many aspects of life that contribute to one's perceived and actual safety in their home and in their community. This includes built environments that mitigate the chance of slips, falls, and injuries, access to technical and legal advice to support decision making and independence, and education, strategies, and other measures to address online and phone scams, property theft, and financial abuse, neglect, and violence. It includes the many programs and services required to create and sustain safe communities.

Built Environment

Slips and falls in their homes and more specifically, in their communities during the winter season (snow and ice) were a constant and consistent concern communicated by seniors, older adults, their families and caregivers, as well as government and NGO stakeholders.

- Stairs rather than ramps and bathtubs rather than showers or walk-in tubs were identified as risks for slips and falls within a seniors' home.
- Snow and icy conditions in one's community as well as curbs and stairs were identified as risks for slips and falls within a seniors' community.
- 53% of government/non-government survey respondents indicated they were concerned that seniors cannot get around their homes safely as they age.

Personal and Property Safety

- There is a heightened sense of concern amongst the seniors as it relates to their safety – expressed during the engagements and throughout the survey responses.
 - 61% of seniors/older adults who responded to the survey indicated that they were concerned about their safety as they age, 28% neither agreed nor disagreed with this statement, and 12% disagreed/strongly disagreed.
 - 56% of family/caregiver respondents to the survey indicated that seniors had expressed concerns about feeling safe or vulnerable in their community.
 - 58% of government/non-government survey respondents indicated they were concerned that seniors living on their own were vulnerable to neglect or abuse, and 69% of these respondents identified senior abuse and neglect as a concern in their community.

“We are very vulnerable as we age.”

- The community engagements with seniors and those conducted with other stakeholders provided an opportunity to explore safety concerns:
 - Phone and online scams/fraud were consistent and concerning across the NWT.
 - Suggestions were made for relevant information, education, and a go-to person.
 - Property theft was identified as a concern and a reality.
 - Fear of and/or intimidating behaviour exhibited by inebriated people and/or people assumed to be homeless was another concern identified in some communities.
 - Concerns were specifically raised about the impact of addictions and the drug trade on safety in their community.
 - Seniors would identify that safety in their community reflected the location of their home, the facility they were accessing, and/or the part of their community they were in or avoided.
- Awareness of financial abuse of elders and many examples were provided across the territory related to family visiting once a month, on pension day, to get money from their parent/grandparent – to getting the elder drunk to access their bank card – to stealing their bank card – to using the bank card and pin which had been provided by the elder so the family member could pay bills and/or buy groceries for the elder – to getting money from their parent/grandparent when it came to big settlements, such as those for residential school.
 - Seniors and other stakeholders identified various reasons for financial abuse which included:
 - > addictions – primarily those of their children and/or grandchildren although some seniors have their own history of addictions which may make them more vulnerable when their child or grandchild arrives with alcohol to get them drunk so that they will provide them with money or their bank card
 - > inter-generational trauma related to colonialism, residential schools, and the cycle of violence
 - > precarious or low-income employment and/or the child or grandchild not having their own income, so they look to their parent or grandparent for money

- > multi-generational and over-crowded homes
 - > Concerns about the impact of financial abuse on the elder's ability to pay their own bills, up to and including buying their own groceries, were raised.
 - > gap: no entity seems responsible for and/or responsive to financial abuse
 - > gap: resources about identifying and responding to financial abuse
- Some seniors need help with decision-making, estate planning, making wills, and/or power of attorney. They may not be able to afford these services, so who can they turn to for help? The role of the Public Guardian and Public Trustee was also identified as necessary to keep some seniors safe.
- In response to the question of what could be done to improve the safety of seniors, many suggestions were made:
 - Safe built environments (homes and communities) to prevent slips, falls, and injuries
 - Information, education, and strategies related to all aspects of safety
 - Access to technical and legal advice regarding power of attorney, estate planning, and wills
 - Community-based positions to help address and prevent elder abuse
 - Programs and services for the homeless population
 - Addiction treatment and aftercare

Pillar 4: Information and Communication

Information and communications outlines how support programs, activities, news, and resources are shared with seniors, their families, and caregivers. It refers to sharing information in a way that is accessible, culturally safe, and considers various communications mediums that acknowledge the diversity of needs and resources of seniors.

- Generally, seniors were identified as a challenging group to engage with and that they are a diverse group using diverse communication tools with diverse needs and interests.
- Seniors often acknowledged that they needed to take responsibility for being informed about the activities/opportunities to be active in their community.
- Information sharing suggestions included:
 - Different mediums to meet the diverse needs of seniors: word of mouth, phone tree, radio, social media, and posters
 - Relevant information about events, programs and services, and resources (e.g., home care, free cleaning supplies, and more) a senior may wish to access – developed and shared at the community level
 - Regular, in-person activities for seniors that include a meal provide good opportunities for information sharing (in particular, Indigenous seniors – elders)
 - One-stop information shop approach
- Information overload and system complexity, as well as language and literacy, were identified as undermining effective information sharing.
- Seniors do not necessarily know who provides what service, the associated process and/or eligibility criteria, and who to ask for help, if they feel comfortable asking for help and/or interacting with the system.
 - Additional caregivers also identified this gap with 49% indicating they did not know where to find information about services seniors may need, nor did they know how to those supports.
- Seniors regularly identified the need for a designated person – whether they be a path finder, a seniors’ navigator, Elder support worker, or some other title – who was knowledgeable about seniors’ programs, services, and issues and would buffer them from the system and/or help them navigate the system. The system seems fragmented and overwhelming to seniors and even more so for survivors of residential school.

- Gap: seniors' access to and/or comfort with technology given that so much information is shared electronically.
- 64% of senior/older adult survey respondents used friends and family as a primary medium for getting information and news followed by email and radio
- 83% of senior/older adults reported use of social media and other online platforms as a source of connection

“Communication is so important, and agencies certainly provide it online and in written form, but I believe face to face communication would make a big difference for seniors.”

“There is not much advertised for seniors to have outings with age-appropriate peers.”

“It would be beneficial to have something put in writing of all the benefits that someone from 55+. If there was a listing of all the businesses and the discounts they offer to seniors, that would also be great! There is so much confusion about what there is available out there for us.”

“Most seniors do not know what is available.”

“Currently there is little to no coordination between GNWT departments for services or programs offered to seniors.”

“Doing this survey, I realize that there are programs like subsidies to help seniors. It would be good to let seniors know what are available!”

“I know there is lots of information provided on various websites, etc. The issue is knowing what opportunities exist so people can take advantage of them. I believe that more and better communication is needed about what programs already exist and others that could be offered if there is interest in the community.”

Appendix B – Regional Income Statistics

Regional Income Statistics by Age and Gender – NWT, 2020									
55 to 64 years									
	Total			Men+			Women+		
	Pop. 55 to 65 with Income	Median Amount (\$)	Average Amount (\$)	Pop. 55 to 65 with Income	Median Amount (\$)	Average Amount (\$)	Pop. 55 to 65 with Income	Median Amount (\$)	Average Amount (\$)
Northwest Territories	5,195	77,000	87,900	2,685	83,000	95,600	2,510	71,500	80,100
Beaufort Delta Region	720	59,200	72,400	385	60,000	75,600	335	58,800	68,800
Aklavik	70	43,200	60,000	35	32,000	40,000	35	64,500	76,000
Fort McPherson	95	45,600	58,000	50	46,800	60,000	45	44,400	54,000
Inuvik	365	82,000	85,200	195	93,000	93,000	170	75,500	76,000
Paulatuk	30	71,000	72,000	15	X	70,000	15	X	80,000
Sachs Harbour	X	X	X	X	X	X	X	X	X
Tsiigehtchic	X	X	X	X	X	X	X	X	X
Tuktoyaktuk	100	34,000	52,000	60	34,000	50,000	35	34,400	56,000
Ulukhaktok	45	27,600	60,000	25	115,000	90,000	20	16,000	28,000
Dehcho Region	425	55,600	69,200	235	56,800	73,500	195	54,800	64,000
Fort Liard	55	34,000	48,000	30	25,000	36,000	25	36,000	64,000
Fort Providence	100	46,400	65,000	50	46,400	74,000	50	46,800	56,000
Fort Simpson	180	84,000	85,000	100	92,000	94,000	75	82,000	72,000
Hay River Reserve	25	41,200	52,000	10	X	50,000	10	X	50,000
Jean Marie River	X	X	X	X	X	X	X	X	X
Kakisa	X	X	X	X	X	X	X	X	X
Nahanni Butte	X	X	X	X	X	X	X	X	X
Sambaa K'e	X	X	X	X	X	X	X	X	X
Wrigley	X	X	X	X	X	X	X	X	X
Sahtu Region	280	88,000	86,000	145	95,000	90,000	135	84,000	82,000
Colville Lake	X	X	X	X	X	X	X	X	X
Délıne	70	56,000	68,000	35	52,400	60,000	40	69,000	76,000
Fort Good Hope	55	84,000	78,000	30	46,800	72,000	30	91,000	90,000
Norman Wells	90	113,000	118,000	50	134,000	144,000	40	90,000	88,000
Tulita	50	54,000	68,000	30	55,600	64,000	25	42,400	72,000

Regional Income Statistics by Age and Gender – NWT, 2020									
55 to 64 years									
	Total			Men+			Women+		
	Pop. 55 to 65 with Income	Median Amount (\$)	Average Amount (\$)	Pop. 55 to 65 with Income	Median Amount (\$)	Average Amount (\$)	Pop. 55 to 65 with Income	Median Amount (\$)	Average Amount (\$)
South Slave Region	940	72,500	80,400	480	75,500	88,800	465	68,000	72,400
Enterprise	X	X	X	X	X	X	X	X	X
Fort Resolution	65	40,400	54,000	40	40,000	48,000	30	41,200	60,000
Fort Smith	315	72,500	76,500	155	72,500	79,000	160	75,500	74,500
Hay River	505	80,000	88,800	260	100,000	102,000	245	66,000	74,500
Lutselk'e	30	56,800	52,000	15	X	60,000	15	X	50,000
Tłı̨chǫ Region	245	46,800	62,000	130	55,200	67,000	110	36,800	57,000
Behchokǫ	165	43,600	60,800	90	55,200	65,000	70	37,200	56,000
Gamètì	25	69,000	76,000	10	X	80,000	10	X	70,000
Wekweètì	X	X	X	X	X	X	X	X	X
Whatì	40	46,400	64,000	20	52,400	60,000	20	38,400	64,000
Yellowknife Region	2,585	88,000	100,800	1,305	100,000	112,400	1,275	78,500	90,000
Dettah	X	X	X	X	X	X	X	X	X
Yellowknife	2,450	89,000	102,100	1,235	102,000	113,600	1,215	81,000	91,400
Region 6, Unorganized	85	77,000	92,000	45	99,000	112,000	40	58,400	68,000

Regional Income Statistics by Age and Gender – NWT, 2020

65 years and over

	Total			Men+			Women+		
	Pop. 55 to 65 with Income	Median Amount (\$)	Average Amount (\$)	Pop. 55 to 65 with Income	Median Amount (\$)	Average Amount (\$)	Pop. 55 to 65 with Income	Median Amount (\$)	Average Amount (\$)
Northwest Territories	3,850	44,000	60,600	2,000	48,800	68,600	1,850	40,400	52,150
Beaufort Delta Region	605	31,000	51,000	300	32,800	56,400	305	30,400	45,600
Aklavik	60	28,000	35,000	30	28,000	36,000	25	27,000	34,000
Fort McPherson	95	30,000	38,500	45	28,800	42,000	45	31,000	35,000
Inuvik	265	40,800	65,500	135	47,600	75,000	125	37,600	56,000
Paulatuk	25	32,800	60,000	15	X	50,000	15	X	70,000
Sachs Harbour	X	X	X	X	X	X	X	X	X
Tsiigehtchic	X	X	X	X	X	X	X	X	X
Tuktoyaktuk	85	31,200	46,000	45	34,400	48,000	40	29,200	44,000
Ulukhaktok	35	26,800	30,000	10	X	20,000	20	33,200	34,000
Dehcho Region	425	33,600	48,000	225	33,600	51,200	200	33,600	44,400
Fort Liard	60	27,200	39,000	30	28,200	44,000	30	26,400	32,000
Fort Providence	100	35,200	46,000	60	34,800	48,000	45	36,000	42,000
Fort Simpson	135	45,600	65,000	70	46,000	72,000	70	45,600	58,000
Hay River Reserve	40	28,400	36,000	20	26,800	36,000	20	X	36,000
Jean Marie River	X	X	X	X	X	X	X	X	X
Kakisa	X	X	X	X	X	X	X	X	X
Nahanni Butte	X	X	X	X	X	X	X	X	X
Sambaa K'e	X	X	X	X	X	X	X	X	X
Wrigley	X	X	X	X	X	X	X	X	X
Sahtu Region	230	36,000	52,400	140	36,400	54,000	90	34,400	50,000
Colville Lake	X	X	X	X	X	X	X	X	X
Déline	80	38,800	52,000	50	36,000	52,000	25	47,200	48,000
Fort Good Hope	50	35,600	44,000	35	34,000	44,000	20	X	45,000
Norman Wells	45	63,600	80,000	30	68,500	85,000	15	X	70,000
Tulita	55	28,400	40,000	25	35,200	38,000	30	25,800	44,000

Regional Income Statistics by Age and Gender – NWT, 2020									
65 years and over									
	Total			Men+			Women+		
	Pop. 55 to 65 with Income	Median Amount (\$)	Average Amount (\$)	Pop. 55 to 65 with Income	Median Amount (\$)	Average Amount (\$)	Pop. 55 to 65 with Income	Median Amount (\$)	Average Amount (\$)
South Slave Region	850	49,200	59,300	435	52,000	64,400	415	42,400	53,800
Enterprise	X	X	X	X	X	X	X	X	X
Fort Resolution	55	33,600	42,000	35	34,000	44,000	25	30,200	40,000
Fort Smith	300	52,800	65,500	160	54,000	71,000	145	50,000	60,000
Hay River	450	49,200	58,600	215	56,800	66,000	235	41,200	51,600
Lutselk'e	15	X	45,000	15	X	X	-
Tłı̨chǫ Region	225	33,600	52,400	115	43,200	58,000	110	28,400	46,000
Behchokǫ	145	31,200	50,000	70	40,800	56,000	75	26,400	46,000
Gamètì	35	38,400	52,000	25	35,200	52,000	15	X	50,000
Wekweètì	X	X	X	X	X	X	X	X	X
Whatì	40	41,600	54,000	20	58,400	64,000	20	29,600	44,000
Yellowknife Region	1,520	56,400	71,300	780	66,500	85,200	735	49,200	57,200
Dettah	X	X	X	X	X	X	X	X	X
Yellowknife	1,450	56,800	71,900	745	67,500	86,600	705	48,800	56,900
Region 6, Unorganized	45	63,200	70,000	30	50,400	64,000	20	X	80,000

Appendix C – Areas of Focus to Enable Seniors to Age in Place with Dignity in the NWT

<p>Built Environment</p> <ul style="list-style-type: none"> • Adequate, affordable, suitable, accessible, and safe options along the housing continuum complemented by core community supports • Accessible buildings, roads and sidewalks, open spaces, and trails within communities • Affordable, accessible, and inclusive community transportation services • Accessible and age-friendly community spaces for recreational, cultural, and social activities for seniors • Alignment with principles of age-friendly communities in the territory 	<p>Healthy Aging</p> <ul style="list-style-type: none"> • A range of financial supports to address the cost of living and financial barriers that undermine healthy aging of seniors • Affordable, accessible, age-friendly, and regular opportunities for seniors to be physically, mentally, and socially active • Health care, home care, and mental health services that are available, accessible, and meet the diverse needs of seniors in the territory • Practical assistance supports (non-medical) for seniors so they may continue to live at home • Human resource capacity and financial resources for sustainable programs and services for seniors
<p>Safety</p> <ul style="list-style-type: none"> • Community infrastructure that contributes to safe built environments • The range of core community supports required for physically safe homes for seniors • Access to technical and legal advice regarding power of attorney, estate planning, and wills • Information, education, and supports to address elder abuse and personal, technology, financial, and property safety • Integrated programs and services for seniors to mitigate social isolation and loneliness, and to enhance personal and community safety 	<p>Information and Communication</p> <ul style="list-style-type: none"> • A multi-medium and culturally safe approach to the delivery of information for and communications with seniors • Timely, accurate, relevant, and accessible information for seniors • Technology education and access to technology resources for seniors • System navigator services for seniors • Senior focused interagency, interdepartmental, and intergovernmental collaboration and coordination

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